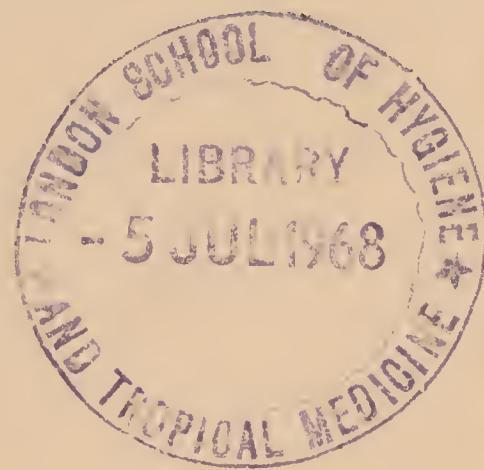


COUNTY BOROUGH OF ST. HELENS



Annual Report
of the
Medical Officer of Health
for the Year 1965

G. O'BRIEN, M.B., Ch.B., D.P.H.,
Medical Officer of Health
and Principal School Medical Officer
Telephone: St. Helens 24061 (Extension 231)

St. Helens

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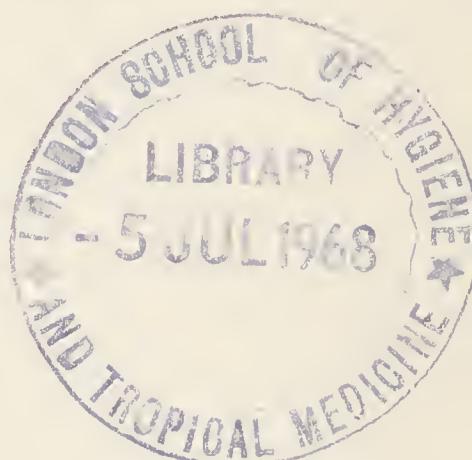
for the Year 1965

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TO THE MAYOR, ALDERMEN AND COUNCILLORS OF THE
COUNTY BOROUGH OF ST. HELENS

Mr. Mayor, Ladies and Gentlemen,

I beg to submit the Report on the health of St. Helens for the year 1965.

The following statement shows some of the principal statistical rates during the past five years.

	1961	1962	1963	1964	1965
Birth rate per 1,000 of population	17.6	18.3	17.7	17.0	17.6
Death rate per 1,000 of population	12.7	11.8	12.4	10.3	12.2
Infant Mortality per 1,000 live births	28.3	22.2	26.9	21.2	19.0
Maternal Mortality per 1,000 total births	0.0	1.0	2.5	1.08	0.0
Tuberculosis death rate per 1,000 of population	0.09	0.11	0.07	0.11	0.07

The birth rate at 17.6 per 1,000 population showed a slight but not significant increase on the previous year at 17.0 per 1,000. 77.9% of all live and still births took place in institutions, and 22.1% were domiciliary births. This would indicate a greater number of births occurring in hospital during the year under review than in previous years.

The outstanding figure was the infantile mortality rate which, at 19.0 per 1,000 live births, was the lowest ever recorded in the County Borough. For the year under review, it would also appear to be one of the lowest in the north-west and is on a par with the national figure for England and Wales which stands at 19.0. The significance of the figure may be appreciated when considered in contrast with the corresponding figure for the Borough 25 years ago when it was 78 per 1,000 live births. This span of a quarter of a century is well within the experience of most of our population, and is surely a satisfactory index of the progress made by the preventive health services in the field of ante-natal and infant care. Equally satisfactory is the record of no maternal deaths during the year.

It may be noted from the above table that the general death rate was returned at 12.2 per 1,000 population as against 10.3 in 1964. This would at first appear to be an appreciable increase but, in fact, the 1964 figure was one of the lowest ever recorded and the figure of 12.2 is closer to the normal average for the town, i.e.

12.4 in 1963
11.8 in 1962; and
12.7 in 1961.

An analysis of the Registrar General's final classification of causes of death did not indicate any significant shift in the usual distribution of categories of deaths.

As regards infectious diseases, there were no cases of diphtheria or poliomyelitis during the year, and no incidence of any major epidemic disease.

Comment should be made on the continuing difficulty in the matter of departmental staff. During the year there was a slow build-up of medical staff to approximately normal strength and a continuation of staff training schemes for Health Visitors, Public Health Inspectors and Welfare and Teaching Officers of the Mental Health Section. It is a matter for regret that some of the students who qualified failed to honour their bond to remain with the Authority for an agreed period following training. It is equally a matter for regret that these persons were aided in their departure by other Local Authorities who were not so active in training their own students. This practice of "poaching" between Authorities is definitely at variance with the appeals made by the Association of Municipal Corporations that Authorities should respect each other's Training Schemes. St. Helens has suffered very badly in this respect, particularly in the Mental Health Section. The situation regarding clerical staff will shortly also give rise to concern. Our senior officers are nearing retirement and there is little hope of replacement from existing staff because of poor recruitment during the past few years. In this field, the competition with industrial training projects is severe, and unless all Local Authorities are prepared to invest wholeheartedly in the academic training of their employees, there will be great difficulties in the coming years in filling senior posts with adequately trained officers.

As regards general development, the year was one of achievement in the maturing of departmental plans for the strengthening of the Health Services. A beginning was made on the construction of the new abattoir and this development will undoubtedly be of major importance in raising and maintaining hygienic standards in the food industry of the town. St. Helens may be proud of its progressive attitude in this field. A commencement was made towards the end of the year in the construction of the Abbey Road 20-place Hostel for the rehabilitation of patients discharged from mental hospitals, and also the new 12-place Hostel at Ashtons Green for the accommodation of mentally subnormal children under 16 years of age. The rehabilitation hostel in particular is one of the pioneer projects in the north-west, and the Authority is well advanced in this enterprising addition to the community mental health services. Initial steps were also taken during the year for the expansion of the Adult Training Centre for the Mentally Subnormal, but the need for a new Centre is becoming acute. In capital building development, mention must also be made of the need for expanded provision for Day Nursery accommodation.

The two major programmes of Slum Clearance and Smoke Abatement proceeded during the year despite staff difficulties. The No. 1 Smoke Control Area was confirmed by the end of the year and three other areas had been surveyed and forwarded to the Ministry. In Slum Clearance, nine clearance areas were represented to the Public Health Committee comprising a total of 294 houses, and during the year 249 houses were demolished and 194 families, comprising 580 persons, were re-housed.

In the field of Health Education, the Health Committee embarked on new ventures during the year. The Authority became a member of the Merseyside Cancer Education Committee with representation on the central governing body, and in the field of cancer prevention, proposals were laid before the Minister for the establishment of a clinic for screening for cervical cancer in women. The Department was also instrumental in the establishment of a Home Safety Committee which has been formed by the combination of local voluntary and statutory bodies dealing with the problems of accident prevention in the home.

During the year the recommendations of the Ministry of Health regarding fluoridation of the water supplies were considered by the Health Committee. The matter was discussed in great detail and revealed a considerable difference of opinion regarding the desirability of this measure. Both the Health Committee and the Council finally decided that fluoridation should not be adopted.

Mention must be made of the retirement of Alderman M. A. Shard from the Chairmanship of the Health Committee during the year. During her term of office she always showed the utmost sympathy and support for any scheme for the development of Local Authority services, and many of these schemes were completed under her Chairmanship. Fortunately, she has found it possible to continue as Deputy-Chairman so that her mature and wise advice will still be available to the Health Committee.

Although the report necessarily deals with the successful development of major projects planned by the Department for the strengthening of the Health Services, we must remember that such measures of progress could not be carried out without the loyal and sincere co-operation and work afforded by every member of the Department. Without their help and assistance the projects which we have launched could never have reached achievement, and in every sense the members of the staff have worked extremely hard during the year under review.

I would express my gratitude for their support and I would also take this opportunity of thanking the members of the Health Committee and members of the Council for their help, consideration and encouragement during the year.

I have the honour to be,

Your obedient servant,

G. O'BRIEN.

PUBLIC HEALTH COMMITTEE, 1965/66

Chairman:
ALDERMAN J. F. McDONNELL

Deputy-Chairman:
ALDERMAN M. A. SHARD, J.P.

**The Right Worshipful the Mayor
 COUNCILLOR A. LUTHER, J.P.**

Alderman W. Burrows, O.B.E. J.P.
 „ J. E. Hughes, O.B.E., M.M., J.P.
 „ P. M. Lowe
 „ J. A. Waring, J.P.

Councillor W. Andrews

„ T. Harvey
 „ J. J. Henebery, J.P.
 „ W. Johnson
 „ E. Kerr
 „ M. McNamara
 „ R. T. Pardoe
 „ T. Wilcock

HEALTH COMMITTEE

The Public Health Committee and the following:

Mrs. H. B. Bates (co-opted)
 Mrs. B. McGhie (co-opted)

Dr. D. R. Holden (nominated by the Local Medical Committee)

Mr. W. Davies (nominated by the St. Helens Executive Council)

Mrs. E. M. L. Else, J.P. (nominated by St. Helens and District Hospital Management Committee).

STAFF

Medical Officer of Health and Principal School Medical Officer:
GERALD O'BRIEN, M.B., Ch.B., D.P.H.

Deputy Medical Officer of Health:

ROBERT PATTEN RYAN, M.B., B.S., D.P.H. (ceased 5.12.65)
 JOHN E. O'MALLEY, M.R.C.S., L.R.C.P., D.P.H. (from 6.12.65)

Assistant Medical Officers of Health:

John E. O'Malley, M.R.C.S., L.R.C.P., D.P.H. (to 5.12.65).
 Sylvia J. A. Raymond, M.B., Ch.B., D.C.H.
 Ruth Singer, M.R.C.S., L.R.C.P.

Dental Officers:

James P. H. Donovan, L.D.S., R.C.S. (Principal School Dental Officer).
 Annie Patricia Farrell, B.D.S., School Dental Officer

Public Health Inspectors:

Chief Public Health Inspector: Nathaniel Birch
James R. R. Norris, Deputy Chief Public Health Inspector
Griffith R. Hull, Atmospheric Pollution Inspector
Henry T. Rothwell, Specialist Inspector
Fred Platt, Specialist Inspector
Thomas Dean, Specialist Inspector
Norman Smith, Specialist Inspector
John B. Douglas, Specialist Inspector
John McConnell, Specialist Inspector.
Henry P. Bird, Public Health Inspector.
James A. Cavanagh, Public Health Inspector.
Robert C. Woods, Public Health Inspector.
William H. Jackson, Public Health Inspector
Stanley G. Williams, Public Health Inspector
Eric Sawyer, Public Health Inspector
James K. Webster, Public Health Inspector
Graham W. Peattie, Public Health Inspector (from 5.7.65).

Health Visitors and School Health Visitors:

Superintendent: Rita Lamb

Deputy Superintendent: Annie Pimblett (from 1.4.65)

Lilian S. Boardman
 Emily E. Cameron
 Margaret Cunliffe

Margaret M. P. Hill (ceased 30.6.65)
 Edith Lilian Farmer
 Teresa J. Howard

STAFF—continued

Health Visitors and School Health Visitors—continued.

Catherine Knowles	Veronica M. O’Ryan
Eileen O’Connor (ceased 30.9.65)	Doreen A. Caffrey (ceased 31.8.65)
Constance M. Pennington	Margaret T. Fleming
Annie Pimblett (to 31.3.65)	Mary G. MacManamin (ceased 30.8.65)
Joan Highcock	Eno U. Ekong (ceased 27.9.65)
Leah Fazackerley	Lydia O. A. Campbell (from 26.7.65)
Margaret P. Heffernan (from 1.9.65)	Eva V. McDonald (from 26.7.65)
May Fairclough (Part-time) (ceased 7.7.65)	Frances M. Clare (from 26.7.65)
	Freda G. Rigby (from 26.7.65)

Student Health Visitors:

Bridget Madu (from 15.9.65)
Lydia O. A. Campbell (to 25.7.65)
Eva V. McDonald (to 25.7.65)
Frances M. Clare (to 25.7.65)
Freda G. Rigby (to 25.7.65)

Midwives:

Non-Medical Supervisor of Midwives: Audrey I. Robinson

Margaret Boulton	Caroline Leonard (Part-time)
Ethel M. Burrows	Elsie A. Parr
Eileen Evans	Olwen Chisholm
Kathleen Gaskell	Constance A. Flood
Sheila P. Caine	Dorothy Howard (ceased 28.11.65)
Bridget M. Geraghty	Frances M. D. Rodgers
Olive M. Hardman	Enid Edwards (Part-time) (from 23.8.65)

Chief Administrative Assistant: J. J. Spencer, D.P.A.

Welfare Officer (Prevention of Illness, Care and After-Care):

Miss M. Miller (ceased 28.2.65)
Miss Agnes L. Rose (from 3.5.65) (ceased 30.11.65)

Tuberculosis Health Visitor (Part-time): Mrs. Bridget Jackman

Home Help Organiser: Mrs. Elizabeth Henton

Mental Welfare Officers:

James C. Ratcliffe, <i>Senior Mental Welfare Officer</i> (from 6.9.65)
Herbert E. Causey, C.S.W., <i>Senior Mental Welfare Officer</i> (ceased 2.5.65)
Mary McKenna
John R. Bratt (from 1.3.65)
Christine Denton (from 12.7.65)
John R. Bratt (Sectional Clerk, Mental Health Service) (to 28.2.65)
Michael Daybell (Sectional Clerk, Mental Health Service) (from 17.5.65)

Junior Training Centre Supervisor: Miss I. W. Marsh

Adult Training Centre Supervisor: Ronald Heavey (ceased 2.5.65)
Ronald Pardoe (from 28.6.65)

STAFF—*continued*

Clerk/Dispenser:

Charles Watt (from 18.1.65) (also part-time Welfare Officer, Special Treatment Centre).

Ambulance Service:

G. M. Norman (Ambulance Superintendent)

Day Nursery:

Margaret R. Ephgrave (Matron)

The following are Part-time Officers:

Consultant Obstetricians:

Percy Malpas, M.B., Ch.B., L.R.C.P., F.R.C.S., F.R.C.O.G.

Henry V. Corbett, M.Sc., M.D., Ch.B., F.R.C.S., L.R.C.P., M.M.S.A., M.R.C.O.G.

Area Chest Physician:

J. B. H. MacArthur, M.B., B.S., M.R.C.P.E.

Public Analyst and Agricultural Analyst:

J. G. Sherratt, B.Sc., F.R.I.C.

Anaesthetist:

M. J. McCann, L.R.C.P. (Ireland)

Dental Nurse: Margaret M. Litherland

Table V.S.1.
Statistics for St. Helens

YEAR	Population	Birth Rate	Crude Death Rate	Infant Mortality Rate	DEATHS FROM							
					Smallpox	Measles	Scarlet Fever	Typhoid Fever	Typhus Fever	† Diarrhoea	Whooping Cough	Diphtheria
1916†	90,000	26.5	16.8	108	0	2	30	2	0	64	34	85
1917†	90,600	22.0	16.5	123	0	65	20	2	0	37	19	79
1918†	90,600	24.1	21.2	126	0	26	24	0	0	48	24	100
1919†	100,805	25.5	15.0	117	0	5	9	2	0	35	7	25
1920	104,822	31.8	13.5	113	0	56	7	0	0	44	7	13
1921	104,900	29.1	12.6	103	0	7	5	0	0	62	24	5
1922	106,400	26.4	13.4	115	0	60	4	2	0	28	3	5
1923	107,100	24.4	11.9	91	0	0	4	1	0	24	10	8
1924	108,700	24.1	12.0	103	0	29	1	2	0	36	11	4
1925	109,600	23.9	12.0	100	0	17	7	3	4	35	33	6
1926	110,000	23.2	12.0	102	0	27	1	0	0	43	4	6
1927	113,100	20.8	11.4	88	0	60	2	0	0	26	5	7
1928	110,500	21.8	12.0	98	0	15	5	1	0	29	21	10
1929	109,200	20.7	14.6	114	0	49	6	1	0	23	13	11
1930	109,200	21.5	11.4	80	0	7	2	0	0	4	8	4
1931	108,300	20.1	12.5	88	0	30	0	0	0	21	0	7
1932	107,600	20.1	11.4	89	0	1	1	0	0	26	4	0
1933	107,600	18.0	14.0	116	0	12	2	3	0	18	52	8
1934	*108,240	19.1	10.6	65	0	10	2	1	0	19	1	18
1935	108,100	18.7	12.2	94	0	14	2	0	0	21	15	17
1936	108,000	18.3	12.1	56	0	7	4	0	0	13	3	26
1937	107,400	18.6	12.1	88	0	3	2	0	0	12	7	15
1938	107,200	18.2	11.4	70	0	9	3	0	0	16	6	14
1939	106,600	17.3	11.6	79	0	1	3	0	0	18	4	23
1940†	103,300	18.0	13.4	78	0	10	0	0	0	8	5	19
1941†	102,750	18.6	11.4	71	0	2	1	1	0	13	15	13
1942†	101,500	17.7	10.6	65	0	6	0	0	0	13	1	11
1943†	99,410	19.8	13.0	72	0	0	1	0	0	16	4	6
1944†	98,410	20.5	11.3	57	0	4	0	0	0	21	2	1
1945†	99,150	20.3	11.3	60	0	0	0	0	0	17	0	0
1946†	104,740	22.2	11.0	60	0	2	0	0	0	26	3	2
1947†	105,790	25.2	12.7	70	0	10	0	0	0	44	1	0
1948†	110,100	21.3	10.2	61	0	0	0	0	0	14	1	1
1949	112,100	17.9	10.7	41	0	0	0	0	0	10	2	1
1950	112,500	17.9	10.1	39	0	0	0	0	0	21	2	0
1951	109,400	16.9	13.3	38	0	1	0	0	0	14	0	0
1952	109,100	17.8	10.4	38	0	0	0	0	0	11	0	0
1953	108,200	17.5	10.6	44	0	1	0	0	0	9	1	0
1954	*111,700	17.0	10.9	41	0	0	0	0	0	5	0	0
1955	111,900	16.0	11.0	33	0	0	0	0	0	3	0	0
1956	110,900	16.8	10.7	27	0	0	0	0	0	9	0	0
1957	110,900	17.2	10.7	31	0	0	0	0	0	8	0	0
1958	110,600	16.9	11.4	36	0	2	0	0	0	8	0	0
1959	110,700	17.1	10.8	24	0	1	0	0	0	4	0	0
1960	109,610	17.5	11.5	39	0	0	0	0	0	6	0	0
1961	108,480	17.6	12.7	28	0	0	0	0	0	6	0	0
1962	1,8260	18.3	11.8	22	0	0	0	0	0	5	0	0
1963	107,480	17.7	12.4	27	0	0	0	0	0	6	0	0
1964	105,310	17.0	10.3	21	0	0	0	0	0	5	0	0
1965	104,440	17.6	12.2	19	0	0	0	0	0	6	0	0

† Estimated civil population.

* Borough extended.

‡ Gastritis, Enteritis and Diarrhoea from 1950 inclusive.

POPULATION.—The Registrar General's estimate of population for mid-year 1965 was 104,440 compared with 105,310 for mid-year 1964. During the year the natural increase in population (i.e. excess of births over deaths) was 569.

BIRTHS.—The number of live births registered during 1965 as belonging to St. Helens was 1,846, giving a birth rate of 17.6 per 1,000 of the estimated population. The area comparability factor was 1.00, thus, for national comparison, the birth rate remains at 17.6. The birth rate for England and Wales during 1965 was 18.1

Of the 1,846 births, 928 were males and 918 females, giving a sex ratio of 1,011 males to every 1,000 females.

DEATHS.—During 1965 there were 1,277 deaths from all causes (732 males and 545 females), giving a crude death rate of 12.2 per 1,000 of the population, as compared with 10.3 in 1964. The adjusted death rate for the year (for national comparison) after applying the area comparability factor of 1.22 was 14.9 per 1,000 of the population. The death rate for England and Wales as a whole for 1965 was 11.5 per 1,000 of the population.

Table V.S.4 shows that of these deaths, 248 were due to cancer and 568 to diseases of the heart and circulatory system. These two causes, therefore, accounted for 816 out of a total of 1,277 deaths, i.e. approximately 64%. There were 7 deaths from tuberculosis (all forms) during the year compared with 12 in the previous year.

The infantile mortality rate was 19.0 per 1,000 live births, compared with 21.2 in the previous year. The rate for England and Wales was 19.0 per 1,000 live births.

The maternal mortality rate for the year 1965 was 0.0 per 1,000 live and still births. Further reference to the infantile and maternal mortality death rates is made in the appropriate sections of this Report.

Causes of Death.—Figures relating to the causes of, and ages at, death are given in Table V.S.4.

Deaths from Tuberculosis.—Tuberculosis was the cause of 0.5% of all deaths that occurred during 1965. The corresponding percentage in 1964 was 1.1%. The ages at which these deaths occurred are shown in Table V.S.4. Further reference is made in the special section (VII) on Tuberculosis.

Malignant Diseases.—The deaths from these diseases during the past five years were as follows:—

Table V.S.2.

AGE GROUPS	1961	1962	AGE GROUPS	1963	1964	1965
0-1	—	—	0-1	—	—	—
1—	—	—	1—	2	1	—
5—	—	—	5—	—	1	—
15—	—	—	15—	1	1	1
25—	23	12	25—	3	2	4
45—	100	92	35—	15	3	9
65—	77	52	45—	25	20	26
75—	52	47	55—	68	49	68
Total	252	203	65—	75	61	85
			75—	56	43	55
Percentage of Total deaths	18.3	16.7		245	181	248
Death rate per 1,000 of population	2.3	1.9		18.4	16.7	19.4
				2.3	1.7	2.4

The following table V.S.3, gives particulars of deaths due to malignant causes during the last five years:

Table V.S.3.

Cause	1961		1962		1963		1964		1965	
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
Cancer—										
Stomach	31	16	26	15	23	25	15	19	29	18
Lung	55	10	43	3	63	5	49	6	54	7
Other	67	73	38	78	60	69	42	50	60	80
Totals	153	99	107	96	146	99	106	75	143	105
	252		203		245		181		248	

INFANTILE MORTALITY.—During 1965 there were 35 deaths of infants under one year of age (21 males, 14 females) corresponding to an infant mortality rate of 19.0 per 1,000 live births. This was the lowest infant mortality rate ever recorded in the County Borough, the last previous lowest figure being 21.2 per 1,000 in 1964. As in former years investigations were carried out in every instance where death occurred in a child under one year of age. A summary of the findings following these investigations is given in the section of the Report dealing with Maternity and Child Welfare.

Table V.S.4.
Causes of, and ages at, death during 1965

Causes of Death	Sex	Total All ages	Under 4 wks.	4 wks. & under 1 year	Age in Years								
					1	5	15	25	35	45	55	65	75+
Tuberculosis Resp.	M	3	—	—	—	—	—	—	—	1	—	2	—
	F	3	—	—	—	—	—	—	1	—	2	—	—
Tuberculosis Other	M	1	—	—	—	—	—	—	—	—	—	1	—
	F	—	—	—	—	—	—	—	—	—	—	—	—
Syphilitic Disease	M	—	—	—	—	—	—	—	—	—	—	—	—
	F	—	—	—	—	—	—	—	—	—	—	—	—
Diphtheria	M	—	—	—	—	—	—	—	—	—	—	—	—
	F	—	—	—	—	—	—	—	—	—	—	—	—
Whooping Cough	M	—	—	—	—	—	—	—	—	—	—	—	—
	F	—	—	—	—	—	—	—	—	—	—	—	—
Meningococcal Infections	M	—	—	—	—	—	—	—	—	—	—	—	—
	F	—	—	—	—	—	—	—	—	—	—	—	—
Acute Poliomyelitis	M	—	—	—	—	—	—	—	—	—	—	—	—
	F	—	—	—	—	—	—	—	—	—	—	—	—
Measles	M	—	—	—	—	—	—	—	—	—	—	—	—
	F	—	—	—	—	—	—	—	—	—	—	—	—
Other Infective and Parasitic Diseases	M	1	—	—	—	1	—	—	—	—	—	—	—
	F	—	—	—	—	—	—	—	—	—	—	—	—
Malignant Neoplasm, Stomach	M	29	—	—	—	—	—	—	1	—	7	6	10
	F	18	—	—	—	—	—	—	—	—	1	2	11
Malignant Neoplasm, Lung, Bronchus	M	54	—	—	—	—	—	—	—	—	4	21	23
	F	7	—	—	—	—	—	—	—	2	2	21	2
Malignant Neoplasm, Breast	F	14	—	—	—	—	—	—	—	2	2	5	3
Malignant, Neoplasm, Uterus	F	10	—	—	—	—	—	—	—	1	3	1	5
Other Malignant and Lymphatic Neoplasms	M	60	—	—	—	—	—	—	1	3	2	16	17
	F	56	—	—	—	—	—	—	3	3	5	16	14
Leukaemia, Aleukaemia	M	4	—	—	—	1	1	—	—	—	—	2	—
	F	1	—	—	—	—	—	—	—	—	—	1	—
Diabetes	M	4	—	—	—	—	—	—	—	—	—	1	1
	F	7	—	—	—	—	—	—	—	—	—	4	1
Vascular Lesions of Nervous System	M	70	—	—	—	—	—	—	1	2	8	8	26
	F	92	—	—	—	—	—	—	2	2	2	10	24
Coronary Disease, Angina	M	163	—	—	—	—	—	—	1	7	25	43	49
	F	79	—	—	—	—	—	—	1	3	25	13	31
Hypertension with Heart Disease	M	7	—	—	—	—	—	—	—	—	—	2	2
	F	7	—	—	—	—	—	—	—	—	—	3	4
Other Heart Disease	M	46	—	—	—	—	—	—	1	—	2	6	14
	F	69	—	—	—	—	—	—	2	1	5	6	17
Other Circulatory Disease	M	21	—	—	—	—	—	—	—	—	—	4	4
	F	14	—	—	—	—	—	—	—	—	1	3	6
Influenza	M	1	—	—	—	—	—	—	—	—	—	—	1
	F	1	—	—	—	—	—	—	—	—	—	—	1
Pneumonia	M	47	1	—	2	—	—	—	—	2	2	9	12
	F	56	1	—	5	1	—	—	—	2	1	—	11
Bronchitis	M	92	—	—	—	—	—	—	—	1	4	22	41
	F	18	—	—	—	—	—	—	—	1	—	6	9
Other Diseases of Respiratory System	M	10	—	—	—	—	—	—	1	—	1	4	3
	F	4	—	—	—	—	—	—	1	—	1	1	—
Ulcer of Stomach and Duodenum	M	8	—	—	—	—	—	—	—	—	1	3	1
	F	1	—	—	—	—	—	—	—	—	—	1	—
Gastritis, Enteritis and Diarrhoea	M	1	—	—	—	1	—	—	—	—	1	1	1
	F	5	—	—	—	—	—	—	—	—	1	1	2
Nephritis and Nephrosis	M	3	—	—	—	—	—	—	—	1	—	1	1
	F	5	—	—	—	—	—	—	1	—	1	2	1

Table V.S.4.—*continued.*

Causes of Death	Sex	Total All ages	Under 4 wks.	4 wks. & under 1 year	Age in Years									
					1—	5—	15—	25—	35—	45—	55—	65—	75+	
Hyperplasia of Prostate	M	5	—	—	—	—	—	—	—	—	—	1	1	3
Pregnancy, Childbirth, Abortion	F	—	—	—	—	—	—	—	—	—	—	—	—	
Congenital Malformations	M	9	4	2	—	—	1	—	—	1	—	1	—	
	F	1	—	—	—	—	—	—	—	—	1	—	—	
Other Defined and Ill-defined Diseases	M	46	12	—	1	2	1	2	3	5	9	11		
	F	58	8	—	3	2	—	1	1	8	9	23		
Motor Vehicle Accidents	M	22	—	—	3	2	7	2	—	3	3	1	1	
	F	5	—	—	—	1	1	—	—	—	1	1	1	
All Other Accidents	M	15	—	—	2	—	1	—	4	1	—	3	4	
	F	11	—	—	—	—	—	—	—	—	1	2	8	
Suicide	M	10	—	—	—	—	—	—	1	2	1	4	2	
	F	3	—	—	—	—	—	—	—	—	3	—	—	
Homicide and Operations of War	M	—	—	—	—	—	—	—	—	—	—	—	—	
	F	—	—	—	—	—	—	—	—	—	—	—	—	
TOTALS: All Causes.....	M	732	17	4	8	4	13	7	23	66	162	224	204	
	F	545	9	5	4	3	3	9	16	30	81	151	234	
GRAND TOTALS		1277	26	9	12	7	16	16	39	96	243	375	438	

METEOROLOGY

Rainfall—The total rainfall for 1965 as measured at the Victoria Park Observatory was 32.3 inches compared with 28.2 inches in 1964. At Eccleston Hill Waterworks 38.94 inches were recorded compared with 28.96 inches in the previous year. The highest day's rainfall of the year (1.23") occurred during the 24 hour period ending at 9 a.m. on the 9th September. The average daily rainfall for May, June, July and August was 0.09 inches, compared with 0.08 inches for the corresponding period in 1964. The wettest month was September with 6.42 inches, and the driest month was again February with 0.34 inches. Snow fell on 13 days during the year.

Sunshine—During the year 1,141 hours of sunshine were recorded, and the highest reading was 13 on the 14th June. The average daily sunshine during May, June, July and August was just over 5 hours.

Temperature—Temperatures of 70°F and over were recorded on 18 days during the summer. The highest temperature recorded was 80.5°F on the 14th May and the lowest was 18.2°F on the 2nd March.

Wind Pressure—On 17 days during the year a wind force of 20 m.p.h. and over was recorded. The strongest wind recorded was 63 m.p.h. on the 1st November.

The following Table M1 shows the maximum and minimum temperature recorded in each month and the distribution of sunshine and rainfall throughout the year.

Table M.1.

Month	Maximum temperature recorded in shade °F	Minimum temperature recorded in shade °F	Sunshine Hours	No. of sunless days	Rainfall inches	No. of days on which rain fell
1965						
January	56.5	25.6	0	31	3.10	21
February.....	49.5	27.5	24.38	11	0.34	11
March	71.8	18.2	116.83	4	1.34	14
April	71.8	33.2	129.39	1	2.31	22
May.....	80.5	35.1	157.8	1	2.75	17
June.....	73.6	44.0	185.95	0	2.20	13
July	69.7	45.0	118.00	2	3.46	24
August	78.0	43.4	174.65	0	2.93	21
September	71.3	41.8	87.0	8	6.42	22
October	71.1	40.5	94.25	5	1.50	11
November	56.4	46.9	28.45	17	2.27	18
December	55.1	22.7	24.25	18	6.47	26
					35.09	220

INFECTIOUS DISEASES

There were 249 notifications of scarlet fever during the year. This disease continues to be mild in nature and responds well to antibiotic treatment.

The notifications of whooping cough remained low, and this is undoubtedly due to the immunisation campaign carried out during the preceding years.

There were 17 notifications of dysentery and 3 of food poisoning. In both dysentery and food poisoning it was noted that groups of people residing in family units were involved. In general, dysentery occurring in one individual has a tendency to spread to immediate close contacts and 6 of the cases were members of a single family.

There were 3 cases of acute encephalitis notified during the year. All 3 cases were admitted to hospital and unfortunately 2 of these died. This illness is due to a virus and the mortality in this condition does tend to be high. There was no apparent contact between these cases who resided in widely separated areas of the town.

During the second week in August, notification was received from the Medical Officer of Health, Blackpool, that a number of cases of Paratyphoid 'B' had occurred in his area. The cases were associated with an infected unpasteurised milk supply in the Fylde district of Lancashire, the milk having been supplied to residents in a caravan site in that area. A list of St. Helens contacts who had been resident in the camp site was forwarded for follow-up.

All the persons mentioned on the list were visited and their history was investigated. A few of them had had gastro-intestinal symptoms, but in only one case were they severe enough for a doctor to be called. All had returned from their holidays to St. Helens in good health.

Bacteriological investigation showed that ten of the visitors to Blackpool were excreting Salmonella Paratyphi B. The phage type of the organism was the same as that of some 600 other persons, from all parts of the country, who were infected at the same time. These ten persons were admitted to hospital as symptomless carriers of Paratyphoid and were treated with antibiotics. All of them were discharged after 3 or more consecutive specimens of stool were clear of organisms.

It should be noted that none of these ten carriers of the organism showed any clinical signs of Paratyphoid Fever, and it was obvious that the infecting organism was of very low virulence. Had the infection been of a more virulent strain, there is no doubt that a widespread epidemic of disease would have resulted from the infection of this local milk supply. This underlines the extreme necessity of maintaining a pasteurised or sterilised milk supply in all areas, and also the equal necessity of maintaining strict hygienic supervision of camping and caravan sites throughout the country. Considerable publicity is sometimes maintained regarding the danger of consuming raw foodstuffs during travel in southern continental countries. This epidemic demonstrates that the danger may be equally present in our own country.

Table I.D.1.

Notification of Infectious Diseases received during the undermentioned years.

	1956	1957	1958	1959	1960	1961	1962	1963	1964	1965
Smallpox	—	—	—	—	—	—	—	—	—	—
Scarlet Fever	286	208	170	141	118	215	103	45	179	249
Diphtheria	—	—	—	—	—	—	—	—	—	—
Measles	295	2331	289	2206	389	1371	500	1692	1140	888
Whooping Cough	286	284	27	77	213	34	16	149	33	42
Enteric Fever	—	5	—	—	—	—	—	—	—	—
Dysentery	67	35	377	17	12	21	39	58	2	17
Erysipelas	9	8	7	8	2	4	4	2	—	—
Pneumonia*	27	42	15	20	10	19	10	6	—	1
Typhus Fever	—	—	—	—	—	—	—	—	—	—
Puerperal Pyrexia	1	3	3	2	3	4	4	4	3	—
Ophthalmia Neonatorum	—	1	—	—	1	—	—	—	—	—
Acute Poliomyelitis	—	17	1	2	—	7	—	1	—	—
Acute Encephalitis	—	—	—	—	—	1	2	2	—	3
Meningococcal Infections	8	11	3	2	3	2	11	3	1	1
Malaria	—	—	—	—	—	1	—	—	—	—

* Acute Primary and Influenza

Table I.D.2.

Infectious Diseases.—Total number of cases notified, number of cases admitted to isolation hospital, and the total deaths from each disease as shown in Registrar General's classification of deaths.

Year 1965

DISEASE	Notifications received	Cases admitted to hospital	Total Deaths
Smallpox	—	—	—
Scarlet Fever	249	3	—
Diphtheria	—	—	—
Measles	888	12	—
Whooping Cough	42	4	—
Enteric Fever	—	—	—
Dysentery	17	6	—
Erysipelas	—	—	—
Pneumonia, Acute Primary and Influenza	1	1	—
Typhus Fever	—	—	—
Puerperal Pyrexia	—	—	—
Ophthalmia Neonatorum	—	—	—
Acute Poliomyelitis	—	—	—
Acute Encephalitis	3	3	2
Meningococcal Infections	1	1	—
Malaria	—	—	—
Food Poisoning	3	—	—
Paratyphoid Fever	11	11	—

Table I.D.3.

Age distribution of cases of Infectious Diseases notified.

Year 1965

DISEASE	Notifications received	Under 1	1—2	3—4	5—6	10—14	15—19	20—24	35—39	45—49	65—
Smallpox	—	—	—	—	—	—	—	—	—	—	—
Scarlet Fever	249	2	5	23	23	25	130	34	6	1	—
Diphtheria	—	—	—	—	—	—	—	—	—	—	—
Measles	888	44	108	123	133	159	311	8	1	1	—
Whooping Cough	42	3	10	6	9	4	10	—	—	—	—
Enteric Fever	—	—	—	—	—	—	—	—	—	—	—
Dysentery	17	1	2	3	—	—	3	3	2	2	1
Erysipelas	—	—	—	—	—	—	—	—	—	—	—
Pneumonia*	1	—	—	—	—	—	1	—	—	—	—
Typhus Fever	—	—	—	—	—	—	—	—	—	—	—
Puerperal Pyrexia	—	—	—	—	—	—	—	—	—	—	—
Ophthalmia Neonatorum	—	—	—	—	—	—	—	—	—	—	—
Acute Poliomyelitis	—	—	—	—	—	—	—	—	—	—	—
Acute Encephalitis	3	—	1	—	—	1	—	1	—	—	—
Meningococcal Infections	1	—	1	—	—	—	—	—	—	—	—
Malaria	—	—	—	—	—	—	—	—	—	—	—
Food Poisoning	3	—	—	—	—	—	—	—	1	1	1
Paratyphoid Fever	11	—	—	—	1	—	4	1	2	2	1

*Acute Primary and Influenza

Disinfection and Disinfestation.—By arrangement with the Liverpool Hospital Board the use of facilities for disinfection of personal articles of patients is retained at the St. Helens Peasley Cross Hospital. Facilities are also retained at this Hospital in the Cleansing Block for the treatment of scabies and the cleansing of verminous persons. During 1965, 21 cases of scabies were treated, and 24 infested persons were cleansed under these arrangements. In 1964 there were 40 cases of scabies and 10 infested persons.

Laboratory Work.—The following Table, I.D.4., shows the number of specimens received by the Health Department for distribution to various laboratories during the year.

Table I.D.4.

Specimens	Number Received	Results	
		Positive	Negative
Swabs for Diphtheria	4	—	4
Blood for Rh Factor	422	303	119
Gastro-Enteritis, Dysentery, and Food Poisoning	316	34	282
Typhoid and Paratyphoid	182	15	167
Total	921	352	569

IV.—IMMUNISATION AND VACCINATION

Diphtheria Immunisation.—In 1965 the Local Authority's Scheme for Diphtheria Immunisation of the child population was continued as previously. Table I.V.1, below, indicates the number of children in different age groups who received primary immunisation and reinforcing injections in 1965.

Table I.V.1.
Number of children immunised against Diphtheria during 1965.

Born:	1965	1964	1963	1962	1958-1961	Under age 16	Total
Primary Immunisations							
Local Authority Medical Officers	512	370	47	25	297	92	1343
Private Practitioners	166	216	28	6	7	—	423
Total	678	586	75	31	304	92	1766
Reinforcing Injections							
Local Authority Medical Officers	—	16	333	86	1159	908	2502
Private Practitioners	—	11	30	14	49	10	114
	—	27	363	100	1208	918	2616

The following shows the record of primary immunisations carried out since 1960.

1960	1961	1962	1963	1964	1965
2415	2372	1653	1504	1527	1766

There was a slight increase in the number of children receiving primary immunisation during 1965 as compared with the previous year. The figure of 1,766, however, represents all children up to 15 years of age, and a further study of Table I.V.1 shows that of the children born in 1964/65, a total of only 1,264 children born in these two years were immunised during the year. As a threshold of immunity this is still much too low, when it is considered that there are over 1,800 births per year in the County Borough. The same remarks apply equally to immunisation against whooping cough, which is so important in the first five years of life.

There was a much better response to reinforcing injections during the year and almost 1,000 more such injections were given than in the previous year.

VACCINATION AGAINST WHOOPING COUGH

The following Table, I.V.2., shows the number of children immunised against Whooping Cough under this scheme during the year.

Table I.V.2.

Number of children immunised against Whooping Cough during 1965.

Born:	1965	1964	1963	1962	1958 to 1961	Under age 16	Total
Primary Immunisations							
Combined with other antigens							
Local Authority Medical Officers	508	367	44	24	56	3	1002
Private Practitioners	166	216	28	5	7	—	422
Totals	674	583	72	29	63	3	1424
Reinforcing Injections							
Combined with other antigens							
Local Authority Medical Officers	—	16	332	86	177	—	611
Private Practitioners	—	11	30	14	49	7	111
Total	—	27	362	100	226	7	722

Vaccination against Smallpox.—The following Table, I.V.3., is a record of the vaccinations carried out during 1965.

Table I.V.3.

Number of Vaccinations against Smallpox during 1965.

At Ages:	0—3 m'ths	3—6 m'ths	6—9 m'ths	9—12 m'ths	1 year	2—4 years	5—14 years	15 & over	Total
Vaccinations									
Local Authority Medical Officers									
General Practitioners	2	2	5	140	201	48	11	9	418
General Practitioners	6	26	26	24	95	35	13	26	251
General Practitioners	8	28	31	164	296	83	24	35	669
Re-Vaccinations									
Local Authority Medical Officers									
General Practitioners	—	—	—	—	—	6	13	92	111
General Practitioners	—	—	—	—	1	2	13	92	108
General Practitioners	—	—	—	—	1	8	26	184	219

There was a slight increase in the total number of primary vaccinations performed compared with the previous year, namely 669 as against 565 in 1964. In accordance with the Ministry of Health recommendation, a considerable proportion of the primary vaccinations were carried out during the first two years of life, but this alteration in policy as against the previous custom of vaccinating under the age of one year, has not had the effect of altering appreciably the total number of infant vaccinations.

POLIOMYELITIS

During the year, 2,548 persons completed a full primary course of three oral doses of poliomyelitis vaccine. This is 869 more than in the previous year.

In addition, 2,321 persons were given reinforcing doses, which is 228 more than in 1964.

It will be noted that in only one case was Salk vaccine used, the remainder receiving the Sabin oral vaccine.

With regard to the 1-2 year age groups, the position improved slightly and 1,107 children in this group received three oral doses of vaccine during the year as against 1,015 in 1964.

As with diphtheria immunisation, this figure is still too low, and it is again emphasised that the only way of preventing serious outbreaks of these diseases is for parents to have all children immunised and vaccinated.

Present day methods of immunisation are virtually painless and the number of visits to clinics to obtain this protection is now reduced to three in the child's first year of life. A mere three visits to an Infant Clinic gives primary protection against diphtheria, whooping cough, tetanus and poliomyelitis.

TABLE I.V.4.
POLIOMYELITIS VACCINATION 1965

3 Oral Doses

Year of Birth	1965	1964	1963	1962	1958-61	Under 16 years	Others	Total
Local Authority	189	639	182	162	283	99	556	2110
General Practitioners	88	191	46	31	20	18	44	438
	277	830	228	193	303	117	600	2548

3 Salk Injections
1

Reinforcing Doses

Year of Birth	1965	1964	1963	1962	1958-1961	Under 16 years	Others	Total
Local Authority	—	2	11	13	1247	239	560	2072
General Practitioners	—	6	24	20	105	62	32	249
	—	8	35	33	1352	301	592	2321

V.—AMBULANCE SERVICE

Table A.S.1 gives the details of the work carried out by the Ambulance Service in St. Helens during 1965.

Table A.S.1.
CALLS ATTENDED BY AMBULANCE SERVICE DURING 1965.

Month	Accidents			Emergency			General Service Removals			Total
	Street	Works	Home	Sudden Illness	Maternity	Hospital Admissions	Hospital Discharges	Hospital Transfers	Hospital Out-patients	
January	82	18	25	77	76	227	112	43	2751	3411
February	59	15	25	63	94	203	116	36	2736	3347
March	74	12	28	85	74	241	140	35	3207	3896
April	57	9	40	70	62	200	105	45	2829	3417
May	101	6	33	79	77	224	101	31	2942	3594
June	78	9	43	66	82	180	102	38	2923	3521
July	69	16	27	79	68	196	104	35	2916	3510
August	69	9	25	75	89	222	98	29	2691	3307
September	90	14	22	79	82	204	113	32	2900	3536
October	80	21	40	82	82	216	111	34	2862	3512
November	96	18	38	89	89	202	129	28	3377	4055
December	89	12	45	93	93	220	122	38	3077	3785
TOTAL	944	159	391	937	937	2535	1353	424	35211	42891

Table A.S.2.
AMBULANCE SERVICE MILEAGES DURING 1965.

1965 Month	2/4 STRETCHER AMBULANCES			NDJ 999	DUAL PURPOSE RDJ 766	WDJ 704	Total
	BDJ 828	CDJ 233	CDJ 234	EDJ 411	GDJ 111		
January	396	736	557	384	490	1394	1847
February	309	469	317	781	682	1415	1600
March	499	670	932	783	529	1432	9599
April	599	542	375	669	551	1527	10730
May	846	545	601	332	587	1505	10254
June	684	663	609	540	546	1528	10965
July	353	—	786	690	607	220	1679
August	524	—	657	455	487	871	1862
September	690	—	650	750	685	1016	1577
October	938	734	729	977	328	1092	1592
November	431	695	716	835	567	766	2018
December	657	810	664	240	814	897	1933
TOTAL	6926	5864	7613	7436	6300	9286	126950
						20515	22953

Vehicles.

The following vehicles were in commission at the end of the year:—

<i>Make</i>	<i>Reg. No.</i>	<i>Year</i>	
Austin Sheerline	BDJ 828	1951	Ambulances
Austin Sheerline	CDJ 233	1952	
Austin Sheerline	CDJ 234	1952	
Austin Sheerline	DDJ 274	1953	
Austin Sheerline	EDJ 411	1955	
Austin Princess	GDJ 111	1956	
Austin 152	NDJ 999	1960	Dual Purpose Ambulances
Austin 152	RDJ 766	1961	
Austin 152	UDJ 28	1962	
Austin 152	WDJ 704	1964	

(Two vehicles on loan from the Ministry, are maintained and operated by the Ambulance Service on behalf of the Civil Defence Corps.)

Patients and Mileage.

The total number of calls (42,891) dealt with by the Ambulance Service is shown in Table A.S.1 and shows an increase of 1,168 calls over the calls dealt with in 1964. The mileage covered (126,950) in 1965 shows an increase of only 200 miles over the figure of 126,750 miles for 1964.

The following are the details of calls and mileage covered in 1964 and 1965.

		<i>1964</i>	<i>1965</i>	<i>Increase %</i>
General Service Calls	.....	38,405	39,523	2.9
Emergency Service Calls	.....	3,318	3,368	1.5
Total Mileage	.....	126,750	126,950	0.2

In 1965 4 Dual Purpose Ambulances out of the total fleet strength of 10 vehicles, i.e. 40% of the fleet, carried 65.1% of the total patients. The policy of a more balanced fleet of Dual Purpose Ambulances against the larger 2/4 stretcher Ambulances shows economy in running costs, i.e. lower petrol consumption per mile, and more patients carried per single journey. Furthermore, experience over the years has shown that the problem we face in parking at hospitals has been minimised, the Dual Purpose Ambulance being smaller and easier to park.

Consideration for the future of the Ambulance Service was given under the Council's revision of its ten year plan. This increased the staff by two Driver/Attendants and by one operational vehicle, the latter to be a dual-purpose Ambulance. The ultimate objective is to stabilise the fleet at five heavy Ambulances and six dual-purpose vehicles. Experience over the years has shown that this allows for extreme flexibility in fleet working and the use of dual-purpose vehicles is extremely valuable in covering the work of out-patient removals which constitutes by far the major portion of running mileage.

The Committee also decided during the year to extend the use of the Ambulance Service to physically handicapped patients to places of care such as holiday or convalescent homes in connection with the Care and After-Care Service and other welfare services.

During 1965 the following was the staff establishment:—

ADMINISTRATIVE

- 1 Superintendent.
- 2 Clerk Telephonists working normal office hours, Monday to Friday.

OPERATIONAL STAFF

SUPERVISORY

- 4 Station Supervisors, working Shift work rota duty covering 24 hours a day, 7 days a week.
- (3 Driver/Attendants are appointed as deputies to cover sickness and holiday periods).

DRIVER/ATTENDANTS

21 Driver/Attendants work a rotating shift system.

2 Driver/Attendants and 1 Attendant work a regular day duty.

It is necessary to stagger the number of Operational Staff on duty during the day and night. The following table shows the availability of Operational Staff during a normal week day (24 hours).

Period of Day	Midnight until 0830	0830 until 1300	0900 until 1300	1300 until 1600	1600 until 1630	1630 until 1700	1700 until 2100	2100 until Midnight
No. on duty	4	7+	14+	16	13	11	6	4

N.B.—Holiday commitments are covered by two of the three drivers normally scheduled to report at 0830 hours.

Sickness is covered by two of the drivers normally reporting for duty at 0900 hours. This enables the Service to function without any excess holiday and sickness cover at overtime rates.

VI.—MENTAL HEALTH SERVICE

The Mental Health Act, 1959, places upon the Local Health Authority the responsibility for the provision of a comprehensive community care scheme for those persons suffering from mental disorder and the provision of care and after-care schemes to cater for those persons discharged from hospital. The Act defines four categories of mental illness:

- (1) Mental Disorder.
- (2) Severe Subnormality.
- (3) Subnormality.
- (4) Psychopathic Disorder.

Mental Health Staff.—The Medical Officer of Health is responsible for the organization and control of the local services, with the day-to-day administration of the Mental Health Department being supervised by an Assistant Medical Officer of Health. Use is also made of the Consultant Psychiatrist at present on the staff of the Local Education Authority and, where necessary, of specialist Medical Officers of the Regional Hospital Board.

The Local Authority staff training scheme for Mental Welfare Officers continued during the year. One student completed her course of two years' training, and was successful in obtaining the National Certificate in Social Work and was appointed to the staff as a Mental Welfare Officer.

Two Student Trainees were recruited during the year to undergo practical in-service training in the Department, following which they will be placed in appropriate Training Colleges during 1966.

The general staff situation during the year was not satisfactory. There were losses due to transfer of trained officers to other Authorities and as a result it was necessary during the year to extend the service of one of the female Mental Welfare Officers due for retirement. The position during the next year will be an extremely difficult one until the training of new students is completed.

Co-ordination with Regional Hospital Boards. There are frequent consultations with the Board's Consultant Psychiatrists, and growing use is made of the domiciliary visiting service whereby the Psychiatrists are called in and are able to visit patients in their own homes. In addition, one or other of the Mental Welfare Officers make frequent visits to the local hospital psychiatric out-patient sessions.

The provision of residential hostels for the rehabilitation of the mentally ill and for the care of mentally sub-normal children is now imminent. It was felt essential that the Regional Hospital Board Service should be represented on the Local Authority Committee, and for this purpose the Medical Superintendent of Rainhill Mental Hospital was invited to serve as a member of the Mental Health Service Sub-Committee.

It is intended that, with the opening of the Hostels and the extension of community service, the Local Authority should establish the post of part-time Consultant Psychiatric Adviser. This will be a co-ordinating post between the Local Authority Mental Health Services and the Regional Hospital Board services, both in-patient and out-patient.

The Local Health Authority is also undertaking, on request, the supervision of patients on trial or on licence from Psychiatric Hospitals.

Duties Delegated to Voluntary Associations. No duties of the Local Health Authority have been delegated to voluntary organisations. The St. Helens Mental Welfare Society, however, assists in welfare activities among mentally subnormal persons, in connection with the provision of clothing and footwear, day outings, holidays, Christmas parties, etc. The Local Health Authority continued its grant to the funds of the Society for this work. The Women's Voluntary Services also assist in the provision of clothing and footwear.

ACCOUNT OF WORK UNDERTAKEN IN THE COMMUNITY UNDER SECTION 28, NATIONAL HEALTH SERVICE ACT, 1946

Prevention. In dealing with the problem of prevention of mental illness the activities of the Mental Welfare Officers were focussed mainly on domiciliary visiting and arranging contacts with suitable organisations for those in need of advice or early treatment.

Close co-operation has been maintained by the Mental Health Service with practitioners and Consultant Psychiatrists of the local psychiatric hospital. During the year 221 attendances were made by the Mental Welfare Officers of the Local Authority at the local Hospital Psychiatric Out-Patient Clinic.

In addition, a valuable link is provided by frequent case consultations between the Health Visitors of the various districts in the town, the officers of the many statutory bodies and the Mental Welfare Officers.

The growing importance of community care in the work of preventive mental health is shown by the following breakdown list of cases dealt with during the year. Inevitably some of these cases finished up by undergoing hospital treatment, but increasing emphasis on this type of work leads to much desired early diagnosis and early treatment. In many other cases assistance was given in the adjustment of social problems and the bulk of these cases were referred from Consultant Psychiatrists, General Practitioners, and even on requests from patients themselves. In dealing with the following cases, the Mental Welfare Officers paid a total of 344 visits.

Care. In this sphere of activity it was found that the majority of the problems dealt with arise in family life as a result of the admission of a member of the family to hospital. Advice and assistance were sought from the Mental Health Department on many occasions by relatives and not infrequently by request of the patients themselves. In other instances, at the request of Consultant Hospital Psychiatrists in the area, home visits were paid to relatives of in-patients and social histories completed or clinic appointments arranged.

During the year 357 visits were made in connection with these cases.

After-Care. The following summary gives the Local Health Authority's after-care record during 1965:—

Number on list at 1/1/1965 .....	.....	.....	.....	.....	.....	70
Discharged persons requesting after-care .....	.....	.....	.....	.....	.....	37

						107
Deleted from list during 1965 .....	.....	.....	.....	.....	.....	37

Number on list at 31/12/1965 .....	.....	.....	.....	.....	.....	70

After-care continues to provide a constant sphere of activity and great use is made of psychiatric surveillance at the local hospital out-patient clinics. The Mental Health Service continues to be an integral part of the whole process for rehabilitation of discharged patients and close liaison is maintained with the disablement resettlement service of the Ministry of Labour, Welfare Officers of local firms, voluntary organisations, etc.

During the year, 626 home visits were made by the Mental Welfare Officers.

In closing, it should be pointed out that the number of people seeking the aid of the prevention, care and after-care services is increasing yearly. This burden is eased by the fact that a happy relationship exists between the local medical practitioners, the local psychiatric hospitals, the consultant psychiatrists and the mental welfare officers. During the year under review, a total of 1,414 interviews were conducted in this connection.

THE MENTAL HEALTH ACT, 1959.

The following two tables show the work undertaken by the Mental Welfare Officers under the above Act from 1st January, 1965, to 31st December, 1965. Table A gives the sources of referral and classification of new patients, whilst Table B shows the disposal of cases which were referred with a view to Application for Admission being made.

Number of patients referred to Local Health Authority during year ended 31st December, 1965.

Table A

Table B

	Male	Female	Total
1. Admitted to Psychiatric Hospitals—			
(a) On Emergency Applications under Section 29	27	28	55
(b) On Applications for Admission for Observation under Section 25	17	22	39
(c) On Applications for Admission for Treatment under Section 26	5	8	13
2. Notified as an alleged person suffering from mental disorder and dealt with as follows:—			
(a) Informal Admissions (Section 5)	39	86	125
(b) No Application Made	5	5	10

In addition, a number of cases (not St. Helens residents) were dealt with by virtue of the fact that they were overtaken by mental illness while in the County Borough of St. Helens. 23 of these cases were dealt with during the year (9 males and 14 females).

HOSPITAL RETURN FOR 1965.

The following summary gives the disposal of known St. Helens patients in Psychiatric Hospitals during the year:—

No. of Health Service Patients in Psychiatric Hospitals on 1/1/1965	Male	Female	Total
.....	160	199	359
Admissions during the year	100	152	252
	260	351	611

	M.	F.	Total
Deaths during the year	8	9	17
Discharges during the year	87	101	188
	95	110	205

No. of Health Service Patients in Psychiatric Hospitals on 31/12/1965	165	241	406
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The known number of patients in hospitals at the end of the year is at the rate of 3.8 per 1,000 of the population.

MENTAL SUBNORMALITY

Ascertainment. The total number of cases reported and referred as Mentally Sub-normal from the 1st January, 1965 to 31st December, 1965 was 9.

Particulars of these cases are shown in the following Tables.

Table M.H.1.

Cases Reported and Referred and their Disposal

	Under 16 years		16 years and over		Total
	M.	F.	M.	F.	
Cases ascertained during 1965 as suffering from subnormality or severe subnormality. Action taken on reports from:—					
(1) Local Education Authorities on children whilst at school or liable to attend school	5	2	—	—	7
(2) Other sources.....	—	—	2	—	2
TOTAL	5	2	2	—	9
DISPOSAL OF ABOVE					
(1) Placed under Supervision—					
(a) Day Training Centre	5	2	—	—	7
(b) Domiciliary	—	—	1	—	1
(2) Admitted to Hospitals	—	—	1	—	1
	5	2	2	—	9

Hospital Waiting List. As at 31st December it will be noted from the following Table M.H.2 that 6 cases (4 males and 2 females) still awaited vacancies in hospitals.

Table M.H.2.

	Under 16 years		16 years and over		Total
	M.	F.	M.	F.	
1. In urgent need of hospital care					
(i) Cot and chair cases	—	—	—	—	—
(ii) Ambulant low grade cases.....	1	—	1	1	3
(iii) Medium grade cases	—	—	—	—	—
(iv) High grade cases	—	—	1	—	1
2. Not in urgent need of hospital care					
(i) Ambulant low grade cases.....	—	1	—	—	1
(ii) High grade cases	—	—	1	—	1
	1	1	3	1	6

None of the above cases is considered to be in need of hospital care solely because of poor environment.

Cases in Hospitals for Mentally Subnormal Persons. The number of known cases from the County Borough of St. Helens who were in Hospitals for Mentally Subnormal Persons and in Special Hospital Care at 31st December, 1965, is given in the following table:

Table M.H.3.

Hospital	Under 16 years		16 years and over		Total
	M.	F.	M.	F.	
Ashton House	—	—	—	2	2
Birkenhead	—	—	1	1	2
Brockhall	—	—	20	15	35
Calderstones	1	—	12	14	27
Chorley (Eaves Lane)	—	—	—	1	1
Crane Hall	—	—	2	1	3
Greaves Hall	3	3	7	7	20
Lisieux Hall	—	—	2	—	2
Mary Dendy Home	—	—	2	1	3
Moss Side	—	—	1	—	1
Newchurch	3	1	1	5	10
Offerton House	—	—	1	—	1
Olive Mount	1	—	—	—	1
Royal Albert	—	—	5	1	6
St. Joseph's	—	1	—	—	1
Swinton	—	1	—	—	1
The Manor	—	—	—	2	2
Thingwall Hall	—	—	6	—	6
Whitecross Homes	2	—	—	—	2
	10	6	60	50	126

Total number of Reported and Referred Cases at 31st December, 1965.

The total number of reported and referred cases for whom the Local Health Authority of the County Borough was responsible at the 31st December was as follows:—

Table M.H.4.

	Under 16 years		16 years and over		Total
	M.	F.	M.	F.	
Under Supervision	29	16	67	65	177
Under Guardianship	—	—	2	1	3
	29	16	69	66	180

SUPERVISION

This work is carried out by the Mental Welfare Officers.

These cases are visited regularly and reports of the visits submitted to the Medical Officer of Health. In this way, besides maintaining contact with the patient, it is possible for the Mental Welfare Officers to become aware of changes in family and other circumstances. The visits occasionally bring to light domestic problems, and in some cases convalescent holidays have been arranged, hospital or general practitioner treatment obtained, and the help of various organisations sought for the patients and relatives. In this connection, much work has been done in co-operation with probation services, the N.S.P.C.C. and other bodies. Any special recommendations which have been made are noted and placed before the Health Committee.

The number of visits made to these cases during the year was 436.

Guardianship.—At the beginning of 1965, four cases were under guardianship, and one case was discharged during the year, leaving three cases under guardianship on 31st December, 1965.

These cases are visited regularly and in each case a responsible Medical Officer has been appointed. As with Supervision cases, any special recommendations are noted and placed before the Health Committee. During the year 12 visits were made by the Mental Welfare Officers.

Classification of Cases under Guardianship and Supervision.—In Section A of the following Table, cases under Supervision and Guardianship have been classified as to their suitability for various types of training, whilst those actually receiving such training at the 31st December, 1965, are shown in Section B.

Table M.H.5.

	Under 16 years		16 years and over		Total
	M.	F.	M.	F.	
Section A.					
Considered suitable for :—					
(i) Training Centre	27	15	—	—	42
(ii) Industrial Centre	—	—	22	21	43
(iii) Home Training	2	—	2	3	7
	29	15	24	24	92
Section B.					
Number of cases receiving training on 31.12.1965					
(i) Training Centre	27	15	—	—	42
(ii) In Industrial Centre	—	—	22	21	43
(iii) At home	—	—	—	—	—
	27	15	22	21	85

Short-Term Care.—Short-term care was arranged for a number of persons suffering from subnormality or severe subnormality while their families took their annual holiday or some member of the family was in hospital, etc.

	<i>Under 16 years</i>		<i>16 years and over</i>		<i>Total</i>
	M.	F.	M.	F.	
Admitted to National Health Service Hospitals	6	5	5	1	17
Admitted to Private Nursing Homes	—	—	—	—	—
	6	5	5	1	17

During the year 381 interviews took place in the Mental Health Department in dealing with parents and relatives of mentally subnormal persons seeking advice and assistance.

Ashtons Green Junior Training Centre.

The average number of pupils attending the Centre during the year was approximately 31, but it is evident by the increased local interest shown in the facilities and training there, that this number will greatly increase over the coming years. The staff during the year consisted of one Supervisor, one Deputy-Supervisor, four Assistant Supervisors and two Guide Helps. During the year an extra post in the special care unit was established with the grading of Unqualified Assistant Supervisor. This was found to be necessary because of the special problems created in the care and supervision of very low grade sub-normal children.

Under the Department's training scheme two students were placed during the year in the Manchester Training School following their period of in-service training. Two other student trainees were recruited to fill the vacant trainee posts and will later be placed in appropriate training colleges during 1966.

During the year pupils were aided in their recreational facilities by the St. Helens Mental Welfare Society, who organised summer outings for the pupils and a Christmas party for pupils and parents held in the Centre.

Meals are supplied to the pupils by arrangements with the School Meals Service of the local Education Authority and transport to and from the Centre is arranged through the St. Helens Corporation Transport Department.

Adult Training Centre, Sinclair Street.

During the year there was a gradual upgrading of the Adult Centre with a view to its ultimate development into an Industrial Centre. The equipment for the training of males in carpentry and in the use of power tools was extended and on the female side a beginning was made in a very minor form of sub-contract work dealing with the folding of greetings cards.

It became apparent that the question of accommodation was becoming a serious problem as the average number of adult trainees during the year was 31. The difficulty presenting itself to the Committee was the limited life of the premises which were scheduled for demolition under a road widening plan which is to operate probably at the end of the next five years. Despite this it was found necessary to plan for a temporary extension to the present premises in the form of a staff annexe and an extra classroom, and by the end of the year approval had been given to this project with the prospect of the work being completed during 1966. The progress made by the adult trainees was excellent during the year and undoubtedly transition into an Industrial Centre will certainly be possible in the coming year.

During the year the staff consisted of one Supervisor, one Deputy Supervisor, two Craft Instructors, one Assistant Supervisor and one Guide Help.

Meals at the Centre are provided for trainees by agreement with the School Meals Service of the local Education Authority. During the year the charge for meals to the adult trainees was brought into line with that normally charged under the School Meals Service, that is, at the rate of 1/- per meal.

A commencement was also made in the encouragement of trainees to travel to the Centre by means of public transport. For many years they had shared in the transport arrangements provided for the junior pupils, but it was felt that the time had come when the provision of transport to the Adult Centre should be reduced to a minimum. Surprising success attended this scheme and by the end of the year quite an appreciable number of trainees were travelling on public transport through the medium of free passes issued by the Health Committee in agreement with the transport undertaking.

During the year recreational outings for the trainees were arranged by the St. Helens Mental Welfare Society in the form of day outings and Christmas parties which also included the parents.

The development of a Parent/Teacher Association proceeded rapidly and a Youth Club has been formed which is held once weekly at the Adult Training Centre. The Club is run by parents in conjunction with the Training Centre staff and its activities comprise games, dancing, and occasional evening coach trips.

At the end of 1965 the following pupils were in attendance at the Training Centres:—

ASHTONS GREEN JUNIOR TRAINING CENTRE

	Male	Female	Total
Number of pupils on Register, 1st January, 1965	23	15	38
New Admissions	5	4	9
Number ceased to attend	1	4	5
Number on Register at 31st December, 1965	27	15	42
Average Daily Attendance	19	12	31

ADULT TRAINING CENTRE, SINCLAIR STREET

	Male	Female	Total
Number of pupils on Register at 1st January, 1965	17	16	33
New Admissions	6	5	11
Number ceased to attend	1	—	1
Number on Register at 31st December, 1965	22	21	43
Average Daily Attendance	16	15	31

Hostels.

During the year building commenced on the 20-place rehabilitation hostel for mentally ill persons discharged from hospital. Similarly a start was made on the construction of the 12-place Hostel for Mentally Subnormal Children under the age of 16 years to be sited at Ashtons Green in close proximity to the Day Training Centre. It is expected that both projects will be completed during 1966.

VII.—TUBERCULOSIS

Incidence. In 1965, 32 persons were notified as suffering from pulmonary tuberculosis, 8 less than in the previous year. 5 cases of non-pulmonary tuberculosis were also notified during the year, 2 more than the previous year.

The total number of new cases was 42. This figure includes 5 cases added to the Register from other sources, e.g. Death Returns, etc. The total number of new cases for the previous year was 59.

Mortality. 7 deaths in 1965 were due to tuberculosis, 6 being caused by the pulmonary form of the disease.

The death rate from tuberculosis was therefore 0.7 per 10,000 of the population.

Table T.B.2. shows the incidence and death rate figures from 1946.

Table T.B.1.
Particulars of new cases and of deaths during 1965.

Ages	New Cases				Deaths			
	Pulmonary		Non-Pulmonary		Pulmonary		Non-Pulmonary	
	Males	Females	Males	Females	Males	Females	Males	Females
0-	—	—	1	—	—	—	—	—
1-	—	1	—	—	—	—	—	—
2-	—	1	—	—	—	—	—	—
5-	—	—	—	1	—	—	—	—
10-	—	1	—	—	—	—	—	—
15-	—	—	—	—	—	—	—	—
20-	—	1	—	—	—	—	—	—
25-	—	2	—	—	—	—	1	—
35-	3	1	—	—	—	—	—	—
45-	7	4	1	—	1	—	—	—
55-	6	1	—	1	—	2	1	—
65-	5	—	2	—	2	—	—	—
75-	3	—	—	—	—	—	—	—
Totals	24	12	4	2	3	3	1	—

Table T.B.2.
Number of cases notified and number of deaths each year, 1946 to 1965

Year	No. of Primary notifications received.		Deaths		Death Rate per 10,000 of population	
	Pulmonary	Non-Pulmonary	Pulmonary	Non-Pulmonary	Pulmonary	Non-Pulmonary
1946	101	24	48	4	4.6	0.4
1947	111	10	68	9	6.4	0.9
1948	98	15	63	7	5.7	0.6
1949	96	16	58	7	5.2	0.6
1950	104	16	46	4	4.1	0.3
1951	87	17	33	8	3.0	0.7
1952	99	17	37	3	3.4	0.3
1953	104	20	27	4	2.5	0.4
1954	109	3	28	1	2.5	0.1
1955	71	7	24	4	2.1	0.4
1956	116	6	12	3	1.1	0.3
1957	85	20	15	2	1.4	0.2
1958	79	5	17	2	1.5	0.2
1959	68	9	10	3	0.9	0.3
1960	62	6	10	—	0.9	0.0
1961	51	7	10	—	0.9	0.0
1962	49	10	12	—	1.1	0.0
1963	39	2	6	1	0.6	0.1
1964	40	3	11	1	1.0	0.1
1965	32	5	6	1	0.6	0.1

Tuberculosis Dispensary and Chest Clinic. The administration and clinical work of the tuberculosis service is carried out at Bank House, Claughton Street, under the supervision of the Area Chest Physician appointed by the Liverpool Regional Hospital Board. This officer is responsible to the Local Authority for work under that part of Section 28 of the National Health Service Act, 1946, which deals with the care and after-care of patients suffering from tuberculosis. The Welfare Officer, who is wholly employed by the Local Authority, occupies an office at the dispensary. Close liaison is therefore possible between the work of the Regional Board and that of the Local Authority.

During 1965, the following attendances were made at the Dispensary:—

Tuberculous cases and contacts .....	.....	.....	2,012
Other chest conditions .....	.....	.....	1,436

Particulars of St. Helens cases on the Dispensary Register are set out in Table T.B.3.

Table T.B.3.
Register of St. Helens cases of Tuberculosis during 1965.

	Pulmonary	Non-Pulmonary
1. No. of cases on Tuberculosis Register on 1/1/1965	869	113
2. No. of cases added to the Register during 1965—		
(i) Formal Notifications	32	5
(ii) New cases coming to knowledge of Medical Officer of Health from other sources—		
(a) From Local Death Returns	1	1
(b) From Registrar General's Death Returns (transferable deaths)	—	—
(c) Posthumous Notifications	3	—
(d) Transfers from other areas	4	—
(e) Other sources	—	—
3. No. of cases removed from Register during year—		
(a) Recovered	28	—
(b) Deaths—		
(i) Certified as due to Tuberculosis	6	1
(ii) Other Causes	15	—
(c) Transferred to other areas, lost sight of, or otherwise deleted from Register	45	—
4. No. of cases on Tuberculosis Register on 31/12/1965	815	118

Institutional Treatment. 39 tuberculous patients from St. Helens were admitted to Eccleston Hall for treatment during the year 1965. There were 2 in-patient deaths of St. Helens cases during the twelve months.

VIII.—PREVENTION OF ILLNESS, CARE AND AFTER-CARE

Three meetings of the Care and After-Care Sub-Committee were held during the year. The Sub-Committee consists of the following:—

5 Members of the Health Committee.

One representative from each of the following bodies:

The National Assistance Board

The Ministry of Labour and National Service.

The British Legion.

The Soldiers', Sailors' and Airmen's Families Association.

As in previous years the specialised knowledge of the co-opted members proved of great assistance in the work of the Committee. The work during the year was concerned with the welfare and assistance of both tuberculous and non-tuberculous patients.

During the year the work of the Care and After-Care Section was severely handicapped due to a change of staff followed by the permanent illness of the newly appointed Welfare Officer. Despite this, however, the basic work of after-care of tuberculous patients was carried out and schemes of extra nourishment and the issue of material for occupational therapy continued.

The scheme for the provision of nursing requisites in the home was also in operation during the year under review and the visiting and supervision of medical welfare cases undertaken. Close liaison during the year once again was effected with the voluntary organisations and with statutory authorities such as the Ministries of Pensions and of Labour and the National Assistance Board. Financial assistance was also given through various foundations such as The Marie Curie Memorial Foundation and the voluntary fund of the Care and After-Care Sub-Committee.

AMENDMENT TO THE COUNCIL'S PROPOSALS UNDER SECTION 28 OF THE NATIONAL HEALTH SERVICE ACT, 1946.

On 12th October, 1965, the Minister of Health approved the following addition to the Council's existing approved proposals:—

National Health Service Act, 1946, Section 28—Screening for the Prevention or Early Detection of Cancer of the Cervix.

“The County Borough Council will provide a Service based on its Maternity and Infant Welfare Clinics, where appropriate and as opportunity offers, for the collection of cervical smears for cyto-diagnostic investigation by hospital authorities from all women at risk.”

B.C.G. VACCINATION

The scheme for the vaccination of school children against tuberculosis was continued during 1965. During the year, 1,172 children were Heaf tested. Of these, 100 failed to keep their second appointment and will be followed up when the vaccination team again visits the school during the coming year. 49 pupils were found to be positive to the test and, therefore, did not require vaccination. 3 of the remaining pupils found to be negative to the test were unsuitable for vaccination on medical grounds. The remaining 1,020 children were successfully vaccinated with B.C.G. Vaccine.

Pupils who were found to be strongly positive to the Heaf tuberculin test were referred to the Chest Clinic for further investigation. In the majority of these cases it was found that there was a history of contact with a known case of tuberculosis, usually a member of the family. No active cases were found in this group during 1965.

The 49 pupils found positive to the Heaf tuberculin test give a tuberculin positive rate of 4.5% for the groups tested during 1965. This is the lowest rate recorded since the introduction of B.C.G. vaccination.

B.C.G. vaccination, together with tuberculin testing of school children, has a vital part to play in the future struggle against a disease that has been largely controlled, but by no means eradicated.

CHIROPODY SERVICE

The significant increase in the number of chiropody treatments noted in previous years was again apparent in 1965.

The total number of treatments provided, as shown in the following table, was 18,425. This compares with a figure of 14,409 in 1964 and 7,843 in 1963.

CHIROPODY TREATMENTS, 1965.

	SURGERY		DOMICILIARY		TOTAL		GRAND TOTAL
	Male	Female	Male	Female	Male	Female	
January	222	1032	13	66	235	1098	1333
February	244	1067	13	82	257	1149	1406
March....	264	1248	16	92	280	1340	1620
April	229	1099	13	97	242	1196	1438
May	261	1208	17	92	278	1300	1578
June	248	1180	12	100	260	1280	1540
July	294	1277	8	99	302	1376	1678
August	199	968	11	85	210	1053	1263
September	291	1322	19	121	310	1443	1753
October	259	1215	15	98	274	1313	1587
November	287	1303	20	111	307	1414	1721
December	285	1135	12	76	297	1211	1508
	3083	14054	169	1119	3252	15173	18425

The age and sex distribution of patients included on the Chiropody Register, receiving treatment during the year, was as follows:

Sex	AGES		TREATMENTS			
	65-69	70+	Surgery	Domiciliary	65-69	70+
Males	155	385	980	2103	32	137
Females	603	1426	4827	9227	108	1011
Totals	758	1811	5807	11330	140	1148
	2569		17137		1288	

The total number of patients dealt with was 2,569 compared with 2,286 in 1964. Patients increased by 12.4% over 1964, but treatments provided increased by 27.9% in the same period. The growth in the service is, therefore, not so much in the number of elderly persons availing themselves of the facilities offered, as in the number of occasions when treatment is given. The gradual increase in the average number of treatments provided to individuals over the past three years is illustrated by the following table:—

AVERAGE NUMBER OF TREATMENTS PROVIDED TO EACH INDIVIDUAL PATIENT

Sex	Treatments per annum		
	1965	1964	1963
Males	6.0	4.8	2.5
Females	7.5	6.6	5.0

It must be remembered that the above averages include new patients commencing treatment and other patients discontinuing treatment during the year. The actual number of treatments given each year to the majority of cases, is, therefore, in excess of the figures quoted above, and in some instances runs at an average of 12 treatments per year.

The service to elderly persons in St. Helens is provided by Chiropodists practising in their own surgeries, and the frequency and/or regularity of appointments is at the discretion of the Chiropodist providing the treatment. There is, therefore, a possibility of very considerable variations in the intervals between appointments fixed by individual Chiropodists. It is suggested that consideration may be given to discussing with the Chiropodists the possibility of agreeing on a standard regularity of treatments to stabilised or straight forward cases, so that a more uniform service throughout the town may be established and be available for all cases.

At a special Chiropody Clinic sited at the Welfare Foods Centre in Bickerstaffe Street, 80 treatments were provided to a total of 19 patients, 3 being expectant mothers and 16 handicapped persons.

IX—VENEREEAL DISEASES

The St. Helens Special Treatment Centre is under the administration of the Liverpool Regional Hospital Board, but the centre continues to be staffed by male and female nurses provided by the Corporation under agency agreements.

The following statement shows the number of cases dealt with at the Centre during the year 1965, in comparison with the previous year. This includes cases from outside the Borough who may receive treatment at the St. Helens Centre.

Table V.D.1

	1964		1965	
	M	F	M	F
1. No. of cases under treatment or observation on 1st January	22	23	23	20
2. No. of new cases (including cases previously removed from the register who returned for further observation or treatment) and Transfers	134	42	137	46
3. No. of cases discharged after completion of treatment or transferred to other centres or ceased to attend	133	45	143	52
4. No. of cases remaining under treatment or observation on 31st December	23	20	17	14
5. No. of attendances :—				
(a) For consultation or treatment by Medical Officers	471	148	502	160
(b) For intermediate treatments	28	31	37	20

Table V.D.2 shows the number of cases of definite venereal disease treated for the first time at the Centre during each of the past ten years. This table excludes cases which had received treatment previously at other Centres, and also cases removed from the register in previous years who returned for treatment or observation for the same infection.

Table V.D.2

Number of new cases of Venereal Diseases dealt with during 10 years, 1956 to 1965:

Year	Syphilis		Soft Chancre		Gonorrhoea		Total
	M	F	M	F	M	F	
1956	2	2	—	—	14	9	27
1957	4	5	1	—	18	8	36
1958	2	6	—	—	14	7	29
1959	2	—	—	—	20	5	27
1960	—	—	—	—	20	7	27
1961	1	1	—	—	31	20	53
1962	1	—	—	—	24	15	40
1963	—	2	—	—	22	12	36
1964	1	1	—	—	38	15	55
1965	1	—	—	—	21	12	34

The following table V.D.3 gives a summary of the services rendered at the treatment centre during the year, showing the areas in which the patients resided.

Table V.D.3.

<i>Name of County, County Borough, etc.</i>	<i>Syphilis</i>	<i>Gonorrhoea</i>	<i>Other Conditions</i>	<i>Total</i>
St. Helens.....	1	24	135
Lancashire C. C.	—	7	20
Others	—	2	32
Total	1	33	196

Contact Tracing.

During the year the welfare arrangements in connection with the Special Treatment Clinic were carried on as in previous years. The attendant of the Male Clinic and the Department's Welfare Officer of the Care and After-Care Service were responsible for the tracing of contacts and the follow-up of defaulters.

Gonorrhoea in Young People.

Of the 21 males and 12 females who had contracted gonorrhoea, 1 female was under the age of 16, 2 males and 1 female were between the ages of 16 and 17, 5 males and 2 females aged between 18 and 19, 5 males and 3 females aged between 20 and 24, and 9 males and 5 females were aged 25 and over.

X—MATERNITY AND CHILD WELFARE

Care of Mothers and Young Children

NOTIFICATION OF BIRTHS.—Under Section 203 of the Public Health Act, 1936, 1,805 live births and 46 still-births were notified during 1965. The corresponding figures for 1964 were 1,812 live births and 52 still-births.

The total number of live births registered as belonging to St. Helens was 1,846, giving a birth rate of 17.6 per 1,000 of the population for the year 1965. The corresponding rates over the past 5 years were respectively 17.5 in 1960, 17.6 in 1961, 18.3 in 1962, 17.7 in 1963 and 17.0 in 1964.

INFANT MORTALITY.—During 1965 the deaths occurred of 35 infants under the age of one year, giving an Infantile Mortality Rate for that year of 19.0 per 1,000 live births. The corresponding rates during the preceding five years were 39.2 in 1960, 28.3 in 1961, 22.2 in 1962, 26.9 in 1963 and 21.2 in 1964. The average for the five years 1961-1965 was 27.6. The Infantile Mortality Rate for England Wales for 1965 was 19.0 per 1,000 births.

Table M.C.W. 1 below shows the ages at death and causes of death in these infants. It will be noted that 26 of the infants died before the age of one month (the neo-natal period), 5 died between 1 and 3 months, 1 died between 3 and 6 months, and 3 died between 6 and 9 months.

Again by far the greater number of deaths, therefore, occurred within the first three months. The following tables present a statistical review of the deaths with remarks on the apparent causal factors.

Table M.C.W.1

Ages at which death occurred	Causes of Death						Total
	Congenital	Prematurity	Pneumonia	Other Infection	Accidents	Other Causes	
Birth to 24 hours	1	7	—	—	1	2	11
1 day to 7 days	2	5	1	1	—	4	13
8 days to 1 month	—	—	2	—	—	—	2
1 month to 3 months	2	—	3	—	—	—	5
3 months to 6 months	—	—	1	—	—	—	1
6 months to 9 months	—	—	3	—	—	1	3
9 months to 12 months	—	—	—	—	—	—	—
ALL AGES	5	12	10	1	1	6	35

The infantile mortality rate for 1965 was 19.0 per 1,000 live births. This is the lowest rate ever recorded for St. Helens and compares quite favourably with the previous lowest figure of 22.2 per 1,000 live births recorded in 1962.

The decrease in the total was primarily due to a drop in the number of babies who died from congenital abnormalities. There was, also, an increase in the number of survivals following premature births. The single death from accident was due to inhalation of a foreign body.

The following Table M.C.W.2 shows the time of the year at which the various deaths occurred.

Table M.C.W.2.

Month when death occurred of children under one year.

Month during 1965 when death occurred	Causes of Death						Total
	Congenital	Prematurity	Pneumonia	Infection	Accidents	Other Causes	
January	—	—	—	—	—	1	1
February.....	—	3	—	—	—	1	4
March	—	—	3	—	—	1	4
April	—	—	—	—	—	—	—
May.....	—	—	—	—	1	—	1
June.....	4	2	2	—	—	—	8
July	—	1	1	—	—	—	2
August	—	3	—	—	—	1	4
September	—	—	—	—	—	—	—
October	1	1	1	—	—	1	4
November	—	—	1	1	—	—	2
December	—	2	2	—	—	1	5
TOTAL	5	12	10	1	1	6	35

The 19 deaths of premature infants were specially investigated. 12 of these deaths were directly attributable to prematurity. Table M.C.W.3 shows the birth weights of these infants, the periods of pregnancy at which these premature births occurred and the causes of the prematurity. (An infant of $5\frac{1}{2}$ lb. or less at birth is classed as a premature birth for the purpose of the following table.)

Table M.C.W. 3
Analysis of Deaths of Premature Infants

(a) Weights at Birth of Premature Infants

Less than 2 lb. 3 oz. ....	.....	.....	.....	.....	2
2 lb. 3 oz. to 3 lb. 4 oz. ....	.....	.....	.....	.....	5
3 lb. 4 oz. to 4 lb. 6 oz. ....	.....	.....	.....	.....	9
4 lb. 6 oz. to 4 lb. 15 oz. ....	.....	.....	.....	.....	—
4 lb. 15 oz. to 5 lb. 8 oz. ....	.....	.....	.....	.....	3
				Total	19

(b) Periods of pregnancy at which premature births occurred (i.e. 5½ lb. or less at birth)

Period of pregnancy:

23 weeks ....	.....	.....	.....	.....	1
26 weeks ....	.....	.....	.....	.....	1
28 weeks ....	.....	.....	.....	.....	1
29 weeks ....	.....	.....	.....	.....	1
30 weeks ....	.....	.....	.....	.....	1
31 weeks ....	.....	.....	.....	.....	2
32 weeks ....	.....	.....	.....	.....	3
34 weeks ....	.....	.....	.....	.....	2
36 weeks ....	.....	.....	.....	.....	3
38 weeks ....	.....	.....	.....	.....	2
39 weeks ....	.....	.....	.....	.....	1
40 weeks ....	.....	.....	.....	.....	1
				Total	19

(c) Causes of Prematurity

Twins ....	.....	.....	.....	.....	3
Ante-partum Haemorrhage ....	.....	.....	.....	.....	1
Congenital Defect ....	.....	.....	.....	.....	1
Placenta Praevia ....	.....	.....	.....	.....	1
Atelectasis ....	.....	.....	.....	.....	3
Broncho Pneumonia ....	.....	.....	.....	.....	3
Respiratory Distress Syndrome ....	.....	.....	.....	.....	2
Intercranial Haemorrhage ....	.....	.....	.....	.....	1
No apparent cause ....	.....	.....	.....	.....	4
					19

STILL-BIRTHS.—The number of still-births registered as belonging to the Borough was 52. All still-births were investigated, and the causes of intra-uterine deaths were attributable to the following conditions:

Multiple Congenital Deformities	5
Anencephalic	9
Twin Pregnancy	2
Ante-partum Haemorrhage	8
Prolonged 1st Stage Labour	1
Prematurity	5
Prolapsed Cord	2
Rh. Negative with Antibodies	2
Hydrocephalus	2
Cord around Neck	2
Eclampsia (Mother)	2
Toxaemia of Pregnancy	2
Placenta Praevia	1
Asphyxia Pallida	1
Placental Insufficiency	1
Mother on Steroid Therapy	1
No Apparent Cause	5
Mother Diabetic	1
	—
	52
	—

Congenital Abnormalities.—Congenital abnormalities noted in children born within the Borough are notified to the Registrar General and to Alder Hey Hospital where a congenital abnormality inquiry is being conducted by the Department of Child Health. During 1965 a total of 84 abnormalities were noted.

Eight infants with congenital malformations were born at home and these were notified to Alder Hey Hospital.

The remaining 76 St. Helens infants with congenital malformations were either born at Cowley Hill Maternity Hospital or Whiston Hospital, and were notified to Alder Hey Hospital by the respective hospitals.

84 congenital malformations (61 in live births and 23 in stillbirths) occurred in St. Helens infants, and these were notified to the Ministry monthly by the Medical Officer of Health. The following tables give particulars of the site of the malformations and the months of birth throughout the year.

CAUSES OF CONGENITAL MALFORMATIONS

	Home	Cowley Hill Hospital	Whiston Hospital	Total	No. of these which were stillborn
C.N.S.	—	16	7	23	17
Eye and Ear	—	—	1	1	—
Alimentary System	1	7	5	13	—
Heart and Great Vessels	1	—	6	7	—
Respiratory System	1	—	1	2	1
Urogenital System	—	3	2	5	1
Limbs	3	14	2	19	1
Other Skeletal	—	—	2	2	—
Other Malformations	—	3	—	3	1
Other Systems	2	5	2	9	2
	8	48	28	84	23

MONTHS OF BIRTH OF BABIES WITH CONGENITAL MALFORMATIONS

	Home	Cowley Hill Hospital	Whiston Hospital	Total	Died as a result of Malformation	Stillborn
January	3	7	2	12	—	4
February	—	8	3	11	—	4
March	1	3	5	9	1	2
April	—	2	4	6	—	3
May	1	1	4	6	1	1
June	1	3	1	5	1	—
July	—	2	1	3	—	2
August	—	2	1	3	—	1
September	1	1	2	4	—	—
October	1	7	2	10	1	2
November	—	5	2	7	1	2
December	—	7	1	8	—	2
	8	48	28	84	5	23

MATERNAL DEATHS.—During 1965 there were no maternal deaths.

The Maternal Mortality for the year was, therefore, 0.0 per 1,000 live and still-births. The rate for England and Wales was 0.25 per 1,000 live and still births.

INFECTIOUS DISEASES IN MOTHERS AND CHILDREN

Puerperal Pyrexia.—No cases of Puerperal Pyrexia were notified during 1965.

Pemphigus.—No case was reported during the year.

Ophthalmia Neonatorum.—No case was reported during the year.

Other Infectious Diseases.—The following Table, M.C.W.4., shows the number of cases of notifiable infectious diseases which occurred in children under 5 years of age, and the deaths resulting therefrom.

Table M.C.W.4.

	Under 1 year		1-5 years	
	Cases	Deaths	Cases	Deaths
Scarlet Fever	2	—	76	—
Diphtheria	—	—	—	—
Measles	44	—	523	—
Whooping Cough	3	—	29	—
Ophthalmia Neonatorum	—	—	—	—
Meningococcal Infections	—	—	1	—

CLINIC SERVICES

Child Welfare Clinics.—Clinics for children under 5 years of age are held on 10 sessions weekly at 9 centres.

Under the revision of the ten year plan, which was carried out during the year, provision was made for the future siting of a new clinic in the Blackbrook area. This will form part of a community development scheme very similar to that already completed for the Ashtons Green Area where the community services comprise a Youth Centre, Local Authority Health Centre, Welfare Hostel, Library and a Junior Training Centre.

The scheme for the provision of enlarged dental services for expectant and nursing mothers did not operate during the year owing to lack of dental staff. Despite this the provision of dental suites is planned for all new clinics in the town.

Table M.C.W.5. shows attendances at the various Maternity and Child Welfare Clinics.

During the year, routine tests for the detection of phenylketonuria were conducted at Infant Welfare Clinics.

A total of 1,313 tests were conducted in clinics, and in addition a further 801 tests were carried out on the district in the homes of the patients. No case was detected as a result of the survey.

Immunisation against diphtheria is carried out at the Child Welfare Clinics as well as at the special sessions held at the School Clinic in Claughton Street, and at the outlying district clinics.

During the year, health education activities in the various clinics were augmented by a series of film shows on appropriate subjects, which were shown regularly at the Central and District Clinics.

In accordance with arrangements made with the Lancashire County Council, 150 infant welfare cases from the adjoining County area made 892 attendances at the Central or District clinics.

Ante-natal Clinics.—At the end of the year, ante-natal clinics were being held 10 times weekly at 9 centres.

Table M.C.W.5.

Attendances at Maternity and Child Welfare Clinics during 1965

Child Welfare Clinics:		
Number who attended and who were born in:		
(i) 1965	.....	1,284
(ii) 1964	.....	1,073
(iii) 1960-1963	.....	935
Number of attendances by children	.....	18,876
Ante-natal Clinics:		
Medical Officer's Sessions, including Specialist Ante-natal Clinics:		
Number of expectant mothers who attended	.....	1,179
Number of attendances by expectant mothers	.....	5,972
Midwives' Sessions (no medical officer being present):		
Number of expectant mothers who attended	.....	303
Number of attendances by expectant mothers	.....	1,206
Post-natal Examinations at Ante-natal Clinics:		
Number of mothers who attended	.....	124
Number of attendances	.....	134
Gynaecological and Post-natal Clinic		
Number of mothers who attended	.....	166
Number of attendances	.....	186

Poliomyelitis vaccination of expectant mothers was continued during the year at the central immunisation clinic and also at the district ante-natal clinics.

Expectant mothers have routine blood tests carried out at these clinics. The tests are for blood grouping, Rhesus factor and Kahn reaction. During the year, 422 specimens were sent for examination. Of these, 303 were Rhesus positive, 116 were Rhesus negative and 3 Genotype reaction.

Of the 117 patients who were Rhesus Negative in type, 14 had Rhesus Antibodies present. The importance of this test lies in the fact that the doctor in charge of the confinement is forewarned that the baby may need an exchange transfusion immediately after birth. Rhesus Negative blood may be obtained from the Regional Blood Transfusion Centre before the confinement, in readiness for either the mother or the baby. Of these 14 patients, 8 babies needed to have an exchange transfusion which was successful in 7 cases. One baby did not survive.

Routine Blood Counts and Haemoglobin estimations are carried out at all ante-natal clinics, the laboratory work in connection with this being conducted by the Pathologist at the St. Helens Hospital.

In addition to the ante-natal clinics, a Specialist Clinic staffed by two specialist obstetricians attached to the Cowley Hill Maternity Hospital, is held fortnightly. Patients are referred for Consultant advice by Medical Officers of the Local Authority staffing the ordinary ante-natal clinics, and the work done has proved to be of great value. During 1965, 144 patients were referred to the Centre for Consultant opinion.

Midwives' ante-natal sessions at District Clinics were conducted during the year as follows:

<i>Clinic</i>	<i>Patients Attending</i>	<i>No. of Attendances</i>
Albion Street	52	166
Ashtons Green Drive	114	492
Carr Mill	20	81
Elizabeth Street	56	288
Jersey Street	17	59
Lacey Street	44	118

(Midwives' sessions at Albion Street Clinic commenced on the 7th July, 1965, and at Lacey Street Clinic on the 9th July, 1965.)

Arrangements have been operative for many years whereby ante-natal cases from the County districts adjoining St. Helens may attend any of the St. Helens ante-natal clinics for advice and treatment. During the year 157 such cases made a total of 895 attendances at one or other of the clinics.

GYNÄECOLOGICAL AND POST-NATAL CLINIC.—This clinic is held once a week at the Hardshaw Street Centre and serves the double purpose of investigation of gynaecological conditions associated with pregnancy and as a clinic for post-natal supervision. During 1965, 133 patients visited this clinic for post-natal examinations. Post-natal supervision is, however, also carried out at the Infant Welfare and Ante-Natal Clinics held in the outlying districts. The total number of women who received special post-natal supervision was 290.

The number of gynaecological patients attending this clinic was 33.

Patients who needed operative treatment were referred to the out-patient departments of the local hospitals.

At this clinic patients may also receive advice on birth control methods when such is desirable for medical reasons. These patients have been instructed in the use of the occlusive diaphragm. The Contraceptive Pill is not issued from this clinic. Patients who wish to use this method of contraception are referred to the St. Helens Branch of the Family Planning Association.

Severe debility caused by frequent pregnancies	7
Hyperthyroidism	2
Mental Instability	7
Hypertension	5
	—
	21
	—

Cervical Smear Clinic.

In December, a new service was set up for the collection of cervical smears for cytodiagnostic investigation, as a means of prevention and/or early detection of cancer of the cervix in all women at risk.

The service was made freely available to the patients of any practitioner in the town who may wish to use it, and a weekly session became operative.

DISTRIBUTION OF WELFARE FOODS

(a) National Welfare Foods Scheme.

The scheme for the distribution of national welfare foods was continued without alteration during 1965.

Table M.C.W.6.

Receipts and issues of welfare foods for the period 27th December, 1964, to 31st December, 1965.

	National Dried Milk	Orange Juice	Cod Liver Oil	Vitamin Tablets
1. Stocks received from Ministry of Food				
(a) In Hand on 1/1/65	839	2631	217	215
(b) Received during the period	9612	17640	2052	2180
Total	10451	20271	2269	2395
2. Disposal of Stocks:				
(a) Issued against coupons—				
(i) paid for by postage stamps	—	—	—	—
(ii) paid for by cash	6365	17997	1862	2019
(iii) free	1015	678	151	27
(b) Issued at full fee	2108	—	—	—
Issues to public	9488	18675	2013	2046
(c) Other Issues	—	216	—	—
Total Issues	9488	18891	2013	2046
3. Returned to Ministry of Food, Damaged, etc.	13	12	3	1
4. Stocks in Hand 26/12/65	950	1368	253	348

The issues of welfare foods from the various distribution centres during the period 27th December, 1964, to 31st December, 1965, are shown in Table M.C.W.7. Receipts during this period amounted to £2,657 13s. 0d. cash.

TABLE M.C.W.7.**Issues of Welfare Foods to the public from the various Distribution Centres 1965**

Distribution Centre	National Dried Milk	Orange Juice	Cod Liver Oil	Vitamin Tablets
Welfare Foods Centre	6963	9322	801	1082
Albion Street Clinic	488	1723	181	192
Blackbrook Clinic	147	587	61	33
Elizabeth Street Clinic	340	1127	154	118
Hardshaw Street Clinic	78	1574	182	276
Carr Mill Clinic	181	1041	158	91
Jersey Street Clinic	218	724	90	49
Lacey Street Clinic	592	1344	189	71
Nunn Street Clinic	360	281	34	21
Ashtons Green Drive Clinic	121	952	163	113
GRAND TOTAL	9488	18675	2013	2046

(b) Other Welfare Foods. The issue of proprietary brands of dried milk through the Council's scheme for mothers and infants was limited to special cases for whom the National Dried Milk was not altogether satisfactory. During 1965, approximately 18,614 lbs. of dried milk were distributed through the Council's Scheme.

DENTAL TREATMENT

Table M.C.W.8.

(a) Numbers provided with Dental Care.

	Examined	Commenced treatment	Completed treatment
Expectant and Nursing Mothers	41	39	30
Children under five	126	123	123

(b) Forms of Dental Treatment Provided:

	Scalings & Gum Treatment	Fillings	Silver Nitrate Treatment	Crowns or Inlays	Extractions	General Anaesthetics	Upper or Lower Dentures Provided		Radio-graphs
							Full	Partial	
Expectant and Nursing Mothers	—	18	—	—	63	23	2	—	—
Children under 5	—	2	1	—	243	122	—	—	—

MINOR AILMENTS.—During 1965, 6 children were referred to and received treatment at one or other of the Council's Minor Ailments Clinics.

CRIPPLED CHILDREN.—Crippling defects in children under 5 years of age are dealt with under the Council's Orthopaedic Scheme, which provides periodic supervision by the Consultant Orthopaedic Surgeon and the Physio-therapist.

During 1965, 111 infant welfare cases were dealt with at the Orthopaedic Clinic.

DAY NURSERY.—This nursery is open from 6.30 a.m. to 7 p.m. Monday to Friday. Accommodation is limited to children whose mothers are working, and vacancies are allocated in the first place to essential priority groups, consisting of unmarried mothers, widows compelled to go to work, wives of chronically sick husbands and wives separated from husbands or divorced. Any vacancies remaining following placings from the essential priority list are then allocated to wives under hardship owing to temporary illness of the wage earner, women in nursing or domestic employment in local hospitals and women in certain essential services such as public transport.

During February and March, 16 cases of measles were reported at the Day Nursery. Other absences were attributed to influenza, bronchitis, tonsillitis and the common cold.

Particulars of attendances &c. at the Hall Street Day Nursery during 1965 are shown below:—

No. of approved places at Day Nursery	No. of children on the register at the end of the year	Average daily attendance during the year
30	43	23.6

PLAY CENTRES.—Two Play Centres are open in St. Helens, at Ruskin Hall, Ruskin Drive, and the Liberal Club, Greenfield Road. They are run by voluntary committees of mothers and have qualified for registration with the Local Authority.

Both Centres are visited each week by a Health Visitor, who gives advice on the care and control of children during their attendance, and ensures that the names of all children attending are registered. Any case of infectious disease occurring at the Centres is notified immediately to the Medical Officer of Health, and adequate precaution is taken against the exposure of all children to infectious disease.

THE CARE OF PREMATURE INFANTS.—Since 1944 special efforts have been directed towards preserving life in premature and/or immature infants. The birth weight is stated on every notification of birth form, and in those cases born at home where the birth weight was 5 lbs. 8 ozs. or less a special visit was immediately made by the Supervisor of Midwives, and, if necessary, arrangements made for admission to hospital. For infants remaining at home, special basket cots fitted with special lining, mattress and bedding, a Belcroy feeding bottle and hot water bottles are available, and have proved of value.

During 1965, 12 premature and/or immature babies were born at home and a further 102 were born in hospital. Particulars of these cases are given in Table M.C.W.9.

When these infants are discharged from hospital, or when the midwife has ceased to attend to those born at home, the Health Visitor concerned is immediately notified and pays special follow-up visits.

THE CARE OF UNMARRIED MOTHERS.—As in previous years, special consideration was given to the care of the unmarried mother and her child, and arrangements were made for admission of cases to St. Monica's Home, Liverpool, and the Mater Dei Home, Blundellsands, and to other appropriate homes. All cases of unmarried expectant mothers coming to the knowledge of the Department through Health Visitors, Municipal Midwives, Moral Welfare Workers and other agencies, are notified to the Medical Officer

in charge of Maternity and Child Welfare Services, who, after investigation, decides which cases can be dealt with at home or through local hospitals, and which cases can most suitably be dealt with by periods of residence in suitable Homes. The mother is admitted to the Home about two months before the expected confinement and remains there after confinement until suitable arrangements can be made for the after-care of herself and the child. During 1965, 56 unmarried mothers were assisted under these arrangements.

In the majority of cases it was found that the parents were willing to keep the girl at home during the pregnancy if some arrangements could be made for the confinement.

The following list gives the places of confinement:—

Cowley Hill Maternity Hospital	.....	.....	.....	.....	.....	.....	.....	11
Whiston Hospital, Prescot	.....	.....	.....	.....	.....	.....	.....	23
Parents' homes	.....	.....	.....	.....	.....	.....	.....	4
Diocesan or other Voluntary Homes	.....	.....	.....	.....	.....	.....	.....	14
Other Hospitals	.....	.....	.....	.....	.....	.....	.....	4
								—
Total	.....	.....	.....	.....	.....	.....	.....	56
								—

Mothers entering Homes are assisted by the Corporation in the payment of their fees. All the unmarried mothers were helped to take out Affiliation Orders.

Every effort was made in all cases to enable the mother to keep the child with her in the parental home, and in many cases these efforts were successful.

Table M.C.W.9.

PREMATURE LIVE BIRTHS

WEIGHT AT BIRTH	Born in Hospital		Born at home or in a nursing home		Transferred to hospital on or before 28th day	
	Nursed entirely at home or in a nursing home		Died			
	Total births	Within 24 hours of birth	In 1 and under 7 days	In 7 and under 28 days		
2 lb. 3 oz. or less	1	—	—	—	—	
Over 2 lb. 3 oz. up to and including 3 lb. 4 oz.	9	3	2	—	—	
Over 3 lb. 4 oz. up to and including 4 lb. 6 oz.	21	7	1	—	—	
Over 4 lb. 6 oz. up to and including 4 lb. 15 oz.	22	—	—	1	—	
Over 4 lb. 15 oz. up to and including 5 lb. 8 oz.	49	2	1	—	—	
Totals	102	13	4	—	—	
			12	1	6	
				—	—	
				—	1	

HOSPITAL ACCOMMODATION.—The Cowley Hill Maternity Hospital, administered by the St. Helens and District Hospital Management Committee, is the only Maternity Hospital in St. Helens and has a complement of 50 beds, which includes a 17-bed General Practitioner unit.

Throughout the year patients booked for the Cowley Hill Maternity Hospital at the Council's Ante-Natal Clinics and also at the Ante-Natal Clinics at the Hospital. When accommodation at the Cowley Hill Maternity Hospital is not available, St. Helens patients are referred to Whiston Hospital. Emergency cases are admitted to Cowley Hill Maternity Hospital when beds are available. Patients are booked for hospital confinement when they come into one of the following classes:—

Abnormal obstetrical cases

Multiparity

Unsuitable home conditions

Primigravidae

When a woman is recommended for hospital confinement on social grounds and applies to her district clinic for a hospital bed, a report is requested from the district midwife regarding the suitability of the home for confinement. The health visitor of the district is also asked to report on the general family conditions, the amount of help available, the type of work on which the husband is engaged, and any other relevant matter, so that the medical officer in charge of the hospital bookings may assess the case. When a hospital bed cannot be granted, the midwife or health visitor visits the patient and advises the use of the Home Help Service in appropriate cases, the use of maternity outfits, and on the general working of the Domiciliary Midwifery Service.

During 1965, 1,409 births (986 being St. Helens cases) took place in the Cowley Hill Maternity Hospital, 440 St. Helens births in the Whiston Hospital, Prescot, and 15 St. Helens births occurred in other hospitals.

XI.—MIDWIFERY SERVICE.

MUNICIPAL MIDWIFERY SERVICE.—The staff establishment of the Municipal Midwifery Service is fifteen District Midwives and one Non-Medical Supervisor of Midwives. At the end of the year there was a staff deficiency of 3 District Midwives.

During 1965 the Supervisor of Midwives attended a Refresher Course.

The midwives work from their own homes and were grouped in districts to allow for relief duties.

In July 1965, however, a new rota system of duties for the Domiciliary Midwives was introduced. It involved district day and night duties. The day duty was operative from 8.0 a.m. to 6.0 p.m., and the night duty from 6 p.m. to 8.0 a.m. All calls for the midwives were centralised through the ambulance station.

The new system has been well accepted by both the staff and the public, who feel that their task is greatly facilitated by using the Ambulance Department to 'call' the midwife. Under the new system, the midwives' 'calls' are taken in strict rotation and the case load is evened out.

The Domiciliary Midwifery Service made increasing use of disposable equipment during the year, and co-operation cards for the interchange of ante-natal information between the midwives and general practitioners came into being.

Meeting of midwives for films and discussions were held regularly during the year.

The following table gives a summary of the work done by the staff of the Municipal Midwifery Service during 1965.

The domiciliary midwives are all trained in the use of Gas and Air Analgesia, Trilene Anaesthesia and the use of Pethidine drugs. There are ten Trilene apparatus in the Midwifery Service, 8 of which are issued to the teaching midwives and two retained at the Ambulance Station for use by the other midwives.

During the year Trilene was administered to 323 patients, Gas and Air Analgesia to 5 patients, and Pethidine to 245 patients.

During 1965, by arrangement with the Local Management Committee, 7 pupil midwives were trained by domiciliary midwives.

The number of cases attended by the staff of the Municipal Midwifery Service represents 21.8% of the total notifications of births in the Borough. The majority of these mothers wished to have their confinements at home, their homes were suitable for a confinement to take place there, and the patients were appreciative of the services provided for them by the Municipal Midwifery Service.

A review of staff was found necessary during the year to deal with the increased number of "early discharge" patients from Maternity Hospitals. The principle of early discharge home in normal cases to facilitate bed turnover has been accepted in part by the Local Hospital Management Committee Group with the result it was found that there was an increase in the demand for domiciliary maternity nursing. It was obvious that it would be wasteful to allocate the services of the whole-time midwifery staff to such duties and, consequently, the establishment of the section was increased by three part-time appointments. These were recruited from retired married midwives who were able to give a certain amount of time each day to the home nursing of early hospital discharges. The system was found to work excellently and, in fact, was one of the recommendations put forward in the review of staff conducted into the use of ancillary help in Local Authority Nursing Services which received the attention of the Health Authority during the year.

Early Discharges from Hospital, 1965

1965	Whiston Hospital	Cowley Hill Hospital	Others	Total No. of Patients Discharged Early	No. of Visits
January	16	1	—	17	45
February	15	5	—	20	84
March	22	16	—	38	128
April	15	3	1	19	82
May	21	2	2	25	81
June	11	17	—	28	93
July	18	5	1	24	93
August	6	1	—	7	30
September	14	1	—	15	52
October....	15	4	—	19	69
November	10	2	1	13	45
December	14	5	—	19	84
	177	62	5	244	886

INSPECTION OF MIDWIVES.—During 1965, 38 midwives notified their intention to practise within the Borough. At the end of the year, 30 of these midwives were still practising within the Borough, and of these 14 were employed by the Local Health Authority, and 16 were engaged at the Cowley Hill Maternity Hospital.

The supervision and inspection of midwives is carried out by Medical Officers and by the Non-Medical Supervisor of Midwives. During 1965, 92 visits were made to the Council's midwives by the Supervisor.

XII.—HEALTH VISITING

The duties of the Health Visitors include the general health welfare of the family as a whole, as well as the specialised duties connected with the School Health Services and the Care of Mothers and Young Children. This means that time is given to home visiting in connection with the welfare of old people, the follow-up of patients discharged home from hospital, enquiries regarding home conditions of mothers requesting confinement in hospital, in addition to the routine and special visits required to be paid to mothers and young children under school age, and home visits directly connected with School Medical Inspections. The Health Visitors also staff the various Ante-Natal Clinics and Child Welfare Clinics in the Borough, and are in attendance at the School Medical Inspections. The staff establishment of 21 Health Visitors was four below strength at the end of the year.

During the year under review four students qualified as Health Visitors and were taken on the establishment. This, however, barely balanced the loss due to transfers and resignations from the staff and at the end of the year we were still below establishment.

The gradual mobilisation of the staff through the medium of payment of car allowances has proved extremely helpful, but it is considered that the establishment of an assisted car purchase scheme for the staff is long overdue.

Special attention was given during the year to health education of the mothers and relaxation sessions were being well attended at the clinics.

Comment was made in the report of last year on the altered status of St. Helens as a training school for Health Visitors. Under the new syllabus issued by the Council for the Training of Health Visitors it was found that St. Helens was not equipped to give instruction on the theoretical side of the course but that if members of the staff were trained as field work instructors in the ratio of one instructor to every three students appointed we could then apply for recognition as a Training School for practical work. The following report was therefore made to the Health Committee by the Medical Officer of Health:

“As regards theoretical training, St. Helens in future must nominate its students not specifically for Liverpool but for any Training Centres in the region. This, of course, introduces the question of subsistence in other towns if placements should be effected there, and the training scheme will require to be amended for Council sanction. The following, therefore, are the proposals for the future re-organisation of the Health Visitor Training Scheme:

- (1) St. Helens to appoint a Sister Tutor or Fieldwork Instructors and reorganise the Department, e.g. relief of Instructor from district duties to accept students for practical training.
- (2) Future students would be appointed on the basis of qualifications as laid down by the Council for the Training of Health Visitors, and their names entered for the most convenient Training School. These nurses would be fully seconded, and where residence away from St. Helens is involved would require to be given subsistence and travelling allowances as well as Course training fees, examination fees etc.

(3) Following training, the students would, as formerly, return to St. Helens for two years' service, and it should also be noted that if St. Helens remains a practical Training Centre, as suggested under paragraph 1 above, they will, every year, be receiving students from the adjoining Centres to do their practical training in St. Helens. This might in time be helpful as regards recruitment of staff."

These recommendations were accepted by the Committee and the scheme for the training of Fieldwork Instructors adopted. Arrangements were made for the placing of suitable candidates for training as Instructors during 1966.

No system of attachment of Health Visitors to General Practices in St. Helens has been introduced, but there is excellent co-operation between the General Practitioners and the Health Visiting Service, and Health Visitors' records are always available to General Practitioners.

The following statement shows the cases visited by Health Visitors during the year:

XIII.—HOME NURSING SERVICE.

ST. HELENS DISTRICT NURSING ASSOCIATION

The provision of home nursing under Section 25 of the National Health Service Act by the Local Health Authority is carried out through the agency of the St. Helens District Nursing Association. During 1965, this arrangement was continued as in former years, the Local Health Authority being fully represented on the Committee of the Association. There is close administrative contact between the Medical Officer of Health and the Superintendent of the Nurses. The Association, however, still retains its vigorous and independent existence, and the voluntary members of the Committee, as Elected Officers, give most valuable service in the work of conducting the day-to-day administration of the service.

During the year under review, there was a very slight diminution in the number of cases attended, namely 2,141 as against 2,158 in 1964. The total number of visits was also decreased, 74,816 visits being paid to cases as against 81,638 in the previous year. These statistical returns, while showing a slight variation, are of no marked significance, but rather reflect an average level of work, since 1964 has been noted for a marked number of cases of illness amongst aged people due to an extraordinary spell of bad weather.

We can state, however, that a satisfactory record of work was completed within the scope and capability of the existing staff. Over the past few years, the continued maintenance of adequately trained staff has become a cause for anxiety. Naturally, every effort has been made to recruit, or otherwise train, nursing staff in accordance with the standard of the Queen's Institute, but the shortage of nursing personnel has become increasingly marked, and not only has there been a falling off in candidates for district training, but there has also been difficulty in the recruitment of whole-time general trained staff.

Evidence was forthcoming during the year by the issue of Ministry of Health Circular 12/65, that this position was a cause of national concern. In this circular, Local Authorities were asked to review establishments in the light of the general shortage of fully trained nurses, and where possible to make use of Ancillary Nursing Help so as to maintain adequate cover for current domiciliary nursing demands.

As a result of this, the local establishment in St. Helens was reviewed by a Working Sub-Committee over a series of meetings, and their recommendations were adopted by the Executive Committee and ultimately approved finally by the Local Health Authority. The survey recommended the following three broad principles in the establishment review:—

- (1) The recruitment of Enrolled Assistant Nurses to be pressed forward to its extreme limit whilst still retaining essential supervision by fully trained staff in all cases.
- (2) A general adjustment of nursing duties to be carried out so that minor tasks of bed bathing and routine hygiene could be undertaken by Assistant or Auxiliary Nursing Personnel, leading to the freeing of fully trained staff to deal with cases of a major type.
- (3) The recruitment of extra clerical staff in order to relieve the nursing staff from a great deal of clerical work so as to free them for more appropriate nursing duties.

At the time of report, these recommendations are now shaping and will, in future, shape the conduct of the Association as a measure to deal with staffing difficulties.

Relations with our General Practitioners in the town remain on a very satisfactory basis, and there is close co-operation between the nurses and doctors in the treatment of referred cases.

The staff deserve commendation for their work during the year and an assurance that their efforts on behalf of the patients are appreciated by the members of the Committee. Their work, particularly with the aged, is invaluable in the framework of the Domiciliary Welfare Services of the town. Once again also, I would express my thanks to the voluntary members of the Committee who gave their time so willingly to the work of the Association and who work in such a close and friendly relationship with the elected representatives of the Local Health Authority on the Executive Committee.

The staff establishment at the end of the year was as follows:—

1 Superintendent
1 Assistant Superintendent
2 Senior District Nurses
22 District Nurses

During the year the staff position remained reasonably satisfactory, although not up to establishment. At the end of the year there was, in fact, six staff vacancies, and it is to be hoped that these will be quickly filled.

**Number of cases attended and visits made
by Home Nurses during 1965.**

	<i>Nature of Illness</i>	<i>Cases</i>	<i>Visits</i>
Medical	1,752	64,908
Surgical	296	7,181
Infectious Diseases	6	31
Tuberculosis	19	1,453
Maternal Complications	31	323
Others	37	920
	Totals	2,141	74,816

Patients (included in above totals) who were 65 years or over	.....	1,064	49,177
Children (included in above totals) who were under 5 years of age	.....	115	1,522
Patients (included in above totals) who had more than 24 visits during the year	.....	586	59,609

USE OF ANCILLARY HELP IN THE LOCAL AUTHORITY NURSING SERVICES

(Ministry of Health Circular 12/65)

REVIEW OF NURSING SERVICES

The circular suggested that a study of Local Authority Nursing Staff might be undertaken in order to ascertain how far its effectiveness could be increased by the employment of other professional and non-professional workers. The importance of ensuring that the skills of qualified nurses were used to their fullest extent was stressed, and it was pointed out that this could be ensured by the employment of ancillary nurses and/or clerical assistants. Such assistance need not lead to any deterioration in the quality or care of patients, provided that adequate supervision by fully trained staff was maintained. It was also emphasised that the introduction of modern techniques based on disposable equipment and of centralised sterile supplies would be aids in assisting skilled staff to a more economical use of their available time.

General

With reference to the Local Authority Nursing Services, the survey covered the three major sections of the Nursing Department, namely (1) Health Visiting Service, (2) Midwifery Service, and (3) Home Nursing Service. Before considering the individual services, note should be made of a recommendation in the circular that the entire Local Authority Nursing team should be organised under a Principal Nursing Officer with administrative and co-ordinating functions, and supported by heads of the individual services. It is my opinion that as regards the County Borough of St. Helens, this is not, at the moment, a necessary development, but it is recommended that consideration might possibly be given to this when future senior appointments in the various sections fall to be renewed.

(1) (a) District and School Health Visitors

<i>Staff:</i>	<i>Establishment</i>	<i>Present Staff</i>
	1 Superintendent	1 Superintendent
	1 Deputy Superintendent	1 Deputy Superintendent
	25 Health Visitors	16 Health Visitors
	6 Student Health Visitors	1 Student Health Visitor
	3 State Registered Nurses	3 State Registered Nurses

It is emphasised that Health Visitors should be relieved of as much non-specialised work as possible in order to concentrate on Health Visiting, and particularly should engage increasingly in Health Education both in homes and clinics. Health Education would be best organised around a Health Visitor in charge of Health Education.

Health Visitors should be made as mobile as possible, and wherever necessary, time should be saved on travelling. They should not spend time in clinics on distributing welfare foods, nutrients or medicaments, handling cash or weighing babies.

Recommendation

A review of the staffing position in the light of the above comments shows that more of the routine work in Infant Welfare Clinics, such as supervision of general arrangements, reception of mothers, weighing of babies, and

care of clinic stock, could be further delegated. At the moment, the part-time services of one State Registered Nurse on the staff is given to this work, but it is only possible to cover five of our clinics in this way. It is recommended, therefore, that to cater for the other five clinics, five sessions should be recruited on a part-time basis from the employable pool of State Registered Nurses in the town.

The following clinic sessions would be covered in this way, namely Lacey Street, Ashtons Green, Carr Mill, Parr, and Hardshaw Street Infant Welfare Clinics. This would free the Health Visitors in these clinics for the purpose of Health Education and motherhood consultation.

As regards clerical assistance, the clinics are already covered, and this also deals with the question of issue of Welfare Foods.

Final Recommendation

Employment 5 sessions per week—part-time State Registered Nurse help.

(1) (b) School Health Visitors

The recommendations of the circular regarding routine basic work in school have been operated to some degree in St. Helens throughout the years by State Registered Nurses acting as Assistants to the School Health Visitors. This assistance, however, has been limited in its nature, and a survey of the staff work shows that there is work available for one extra State Registered Nurse in the field of School Hygiene Inspection. More assistance should also be given in the weighing and measuring of school children at inspections. By these means, the Health Visitors would be freed from their routine duties and could devote more time to Health Education in the schools.

Recommendation

Increase in establishment of one whole-time State Registered Nurse to work in the School Health Visiting Service.

(2) Domiciliary Midwifery Service

<i>Staff:</i>	<i>Establishment</i>	<i>Present Staff</i>
	1 Supervisor	1 Supervisor
	15 Midwives	11 Midwives 2 Part-time Midwives

Mobility of staff by the use of transport is stressed as a means of improving Midwifery Services.

It will be appreciated that the recruitment and use of ancillary help in the Domiciliary Midwifery Service must necessarily be restricted since, by the rules of the Central Midwives' Board, no mother may be attended during the expected confinement or lying-in period except by a State Certified Midwife. As regards this specialised auxiliary help, this matter has been dealt with by the Health Committee, who have delegated to the Chairman and Deputy-Chairman the power to recruit part-time Midwives to help in the nursing of early discharge cases from hospital, and also, when available, to help on district and clinic midwifery work. This will have the effect of freeing the whole-time Midwife entirely for domiciliary confinement work, which is her specialised task.

(3) Home Nursing Service

<i>Staff:</i>	<i>Establishment</i>	<i>Present Staff</i>
	1 Superintendent	1 Superintendent
	1 First Assistant	1 First Assistant
	2 Senior Nurses	1 Senior Nurse
	22 Nurses	9 State Registered Nurses
		4 State Enrolled Nurses
		4 State Registered Nurses (represented by eight part-time)
	—	—
	26	20 Two retired nurses average
	—	— 2 nights each for telephone duties, etc.

A Sub-Committee of the St. Helens District Nursing Association, together with the Medical Officer of Health, analysed the present situation regarding Home Nursing. The following analysis of treatments showed the local position as against the national figures shown in the report:

<i>National Average</i>	<i>Treatments</i>	<i>Local Association Figures</i>
28%	General Nursing Care	23%
17%	Dressings	13%
34%	Injections	54%
9%	Washouts—enemas	1%
5%	Blanket Baths	3%
7%	Others	6%

It will be noted here that the local figure for injections is surprisingly high as against the national average, but most of the other percentages approximate generally to the situation throughout the country.

It was generally agreed that much of the work directed to patients' routine personal hygiene, including baths and foot treatments, in the home, could be undertaken by State Enrolled Nurses. The number of such patients was estimated at being 30 per week. As to clerical work, an analysis of this showed that much of the routine clerical work, including preparation of cards for new patients and nurses daily visit books, could be done by a clerical assistant. This assistant could also assist in the recording and preparation of Committee statistics and statistics for reports, and could assist in the general office during holidays and emergencies.

Recommendation

Regarding recruitment of State Enrolled Nurses, consideration of the establishment tabled above showed that the nursing staff is so much below establishment that such ancillary help could be recruited immediately. The intake, however, would obviously be limited by the total number of trained staff who must ultimately be responsible for the work of the nursing auxiliaries. The latter, when recruited, will receive a course of training in Liverpool in preparation for their work, and as a result of such training will be asked to serve a bound period for the District Nursing Association.

As regards clerical assistance, it was considered that in the first instance this should be part-time, possibly for 20 hours per week as a commencement. The post should preferably be held by someone of mature experience working on a part-time basis, as it was considered that the post, at the moment, did not offer scope for full-time employment of the equivalent of a General Division Clerk. This part-time appointment will shortly be made by the Committee of the District Nursing Association.

Summary

It is recommended:

- (1) That the Health Visiting staff be increased by one whole-time State Registered Nurse, and part-time help on five sessions weekly.
- (2) Part-time assistance, where necessary, be recruited for the Domiciliary Midwifery Service (already approved by Staff Sub-Committee).
- (3) State Enrolled Nurses be recruited to assist in the Home Nursing Service, and also part-time clerical assistance. (This nursing recruitment to be done within the present approved establishment.)

Apart from the minor adjustments recommended above, it will be noted that the Health Department Nursing Service has already been operating basically a system of ancillary help. No major alteration in policy, therefore, is suggested, but a review of the service has shown that more part-time help undoubtedly must be relied upon in future and especially in the field of Home Nursing. Quite a lot of this help must be sought from sources which, up to now, have not been used by Health Authorities because of the lack of full professional training and qualifications. In any use of ancillary help, there must, however, be no lowering of the quality of care provided, and a senior trained officer, in every case, must retain the responsibility and supervisory control over all forms of nursing help.

XIV.—HOME HELP SERVICE.

The Home Help Service operating in St. Helens provides help in cases of maternity, sickness, convalescence, old age and infirmity, or any emergency in the household due to illness.

At the 31st December, 1965, there were 97 part-time Home Helps working an average 26 hour week, representing an equivalent of approximately 56 whole-time Helps.

During the year the Home Helps attended 774 cases, 240 of whom were new cases and 534 old cases from previous years. An analysis of the cases dealt with is given below.

Table H.H.1.

Cases attended	No.	Approx. % of Total Cases	Full Time	Part Time	Recovery of Fees			Free
					Full Fee	Part Fee		
Maternity Cases								
Domiciliary Confinements....	11	1.43	9	2	3	8	—	—
Hospital Confinements	1	.12	1	—	—	1	—	—
Ante-natal Cases	8	1.0	1	7	5	2	1	—
Sickness and other Cases								
Chronic Illness	85	11.0	—	85	19	15	51	—
Acute Illness	8	1.0	—	8	3	3	2	—
Tuberculosis.....	2	.25	—	2	—	1	1	—
Mental Illness	2	.25	—	2	—	2	—	—
Old Age and Infirmitiy	632	81.7	—	632	86	100	446	—
Blind	23	3.0	—	23	—	2	21	—
Care of Young Children	2	.25	—	2	—	—	2	—
Total	774	100.0	11	763	116	134	524	—

Home help service for the 240 new cases during the year was recommended by the following:

Welfare Services (including Pilkington Bros. and W.V.S.)	51
National Assistance Board	34
Health Visitors and Midwives	14
District Nursing Association	2
Hospitals	11
Personal application, neighbours and relatives	112
General Practitioners	13
Society for the Blind	2
Housing Department	1
	240

The following statement shows the domiciliary visits paid during the year:—

Number of primary visits to cases	.....	.....	.....	391
Number of return visits to cases	.....	.....	.....	1638
Number of visits to Home Helps	.....	.....	.....	265
				2294

The standard fee during the year for Home Help Services, as laid down by the Health Committee, was increased from 4/9d. to 4/10d. per hour on 10th May, 1965, and to 5/- per hour on 6th September, 1965.

Once again during the year under review, there was a gradual expansion of the work of the service which showed an increase in the number of cases attended from 710 in 1964 to 774 in 1965. This brought in its train an increase in the establishment, and at the 31st December the establishment had been expanded from the equivalent of 50 whole-time Helps to 56.

The outstanding increase in work done was in the category of old aged and infirmity, and the bulk of these cases, and certainly those persons receiving state pensions, were attended free of charge.

It has been found that the average number of hours allocated to this type of case is 3/4 hours per week, but it is suggested that this is below the minimum need which should more reasonably be placed at 6 hours per week. With the gradual increase in staff, as expected under the 10 year development plan, this target may be reached in the near future.

There is no great difficulty in the town regarding recruitment to the Service, and during the year a special review was carried out directed to enquire in this respect. A copy of the Committee report is given below, and it will be seen from this that while there are difficulties in recruitment in certain areas of the town, the overall position was satisfactory at the time of this report in February, 1965.

HOME HELP SERVICE

As requested by the Health Committee at their January meeting, I give below general information concerning the working of the Home Help Service. The information given includes the state of recruitment, ages of Home Helps and hours worked by each. The demand from various areas of the town is also shown. The boundaries of the areas into which the town has been divided are not defined. They are given to indicate a district and do not take into account the size of population in each. The information further relates to the situation as it existed in January, 1965, when we had a staff establishment of the equivalent of 50 whole-time Helps involving 91 part-time Helps. Authority has since been given to increase the equivalent of whole-time Helps from 50 to 54, and this establishment will gradually be filled as the need arises.

The following shows the age distribution of the 91 Home Helps employed in January. With the exception of one, all these Helps are married women.

Between 30—35 years	8
35—40 „	13
40—45 „	21
45—50 „	15
50—55 „	18
55—60 „	8
Over 60 „	8

Recruitment from each area throughout the town is reasonably even, except in the Dentons Green area, where recruitment is rather difficult. The waiting list of applicants for part-time work in the Home Help Service is shown below:—

Between 30—35 years	5
35—40 „	1
40—45 „	6
45—50 „	7
50—55 „	3
55—60 „	2
 Total	 24
 —	 —

These applicants live in the following districts:—

Town Centre	4
Hard Lane, Windlehurst and Dentons Green	2
Parr—Derbyshire Hill and Fingerpost	3
Eccleston, Newtown, Borough Road and Dunriding Lane	3
Sutton—St. Helens Junction, Waterdale Crescent, Berrys Lane and Sutton Road	1
Dale Head, Clinkham Wood, Carr Mill and Moss Bank	3
Sutton Manor, Sutton Leach and Peasley Cross	1
Sutton Heath and Rainhill	1
Grange Park and Toll Bar	5
Blackbrook	1

It is the policy of the Service to endeavour, so far as possible, to allocate work in a particular district to a Home Help who lives in that district or very near to it, in order to save travelling time.

The following shows the number of hours usually worked by each of the part-time Home Helps:—

No. of Home Helps	Hours normally worked per week		
		15	Overall average 27 hours weekly
4	18		
3	21		
12	24		
12	27		
10	30		
44			
6	Between 31 & 35		

The following gives a general description of areas of the town showing the number of cases, Home Helps employed, and approximate hours worked in each district:—

District	No. of Cases	No. of Home Helps	Approx. Hours
Town Centre	126	25	470
Hard Lane, Windlehurst and Dentons Green	69	11	259
Parr—Derbyshire Hill to Fingerpost	68	13	273
Eccleston, Newtown, Borough Road and Dunriding Lane	63	9	244
Sutton—St. Helens Junction, Waterdale Crescent, Berrys Lane and Sutton Road	47	7	212
Dale Head, Clinkham Wood, Carr Mill and Moss Bank	43	6	174
Sutton Manor, Sutton Leach and Peasley Cross	37	5	152
Sutton Heath and Rainhill	32	6	112
Grange Park and Toll Bar	32	6	161
Blackbrook	14	3	72
Haresfinch	10	2	42

Note: There are approximately 550 patients on the case load at any one time and of these approximately 500 are in the category of old age or chronic illness.

XV.—INCIDENCE OF BLIND AND PARTIALLY SIGHTED PERSONS.

Welfare of blind persons in St. Helens is the responsibility of the Welfare Services Committee of the Local Authority. The majority of their activities in this sphere are undertaken on their behalf by the St. Helens and District Society for the Welfare of the Blind.

The Medical Officer of Health is responsible for arrangements for certification for registration.

During 1965, 64 completed forms B.D.8. were received by the Medical Officer of Health. Of these 34 related to blind persons and 30 to partially sighted persons.

(a) Registered Blind Persons

On the 1st January, 1965, there were 245 persons registered as blind in St. Helens. During the year 32 new cases, plus 1 case transferred from outside the Borough, were added to the register (including 7 cases formerly classed as partially sighted persons), 25 names were removed from the register due to death or transfer out of the Borough. Thus at the end of 1965 there were 253 registered Blind persons in St. Helens. The following analysis gives the information as at 31st December, 1965, concerning the number of Blind persons of both sexes according to age groups.

<i>Age Distribution</i>	<i>Males</i>	<i>Females</i>	<i>Total</i>
Age under 1 year	—	—	—
1-10	1	2	3
11-15	1	—	1
16-20	—	1	1
21-29	3	2	5
30-39	6	7	13
40-49	10	8	18
50-59	15	10	25
60-64	4	10	14
65-69	14	14	28
70-79	30	46	76
80-84	16	21	37
85-89	8	15	23
90-	1	8	9
	<hr/>	<hr/>	<hr/>
	109	144	253
	<hr/>	<hr/>	<hr/>

Educational and Occupational distribution.

The following analysis shows the occupational states of the employed registered blind persons.

				<i>Males</i>	<i>Females</i>	<i>Total</i>
Education—At school	.....	.....	.....	2	—	2
Not at school	.....	.....	.....	—	2	2
				2	2	4

				<i>Males</i>	<i>Females</i>	<i>Total</i>
Employment—Workshops						
Age	16-20	.....	.....	—	—	—
	21-39	.....	.....	3	—	3
	40-49	.....	.....	3	1	4
	50-59	.....	.....	4	1	5
	60-64	.....	.....	—	—	—
	65 & over	.....	.....	—	—	—
				10	2	12

				<i>Males</i>	<i>Females</i>	<i>Total</i>
Employment—Elsewhere						
Age	16-20	.....	.....	—	—	—
	21-39	.....	.....	1	1	2
	40-49	.....	.....	1	—	1
	50-59	.....	.....	2	—	2
	60-64	.....	.....	1	—	1
				5	1	6

Thus 18 were employed during the year (15 males and 3 females).

The following table indicates the different types of occupation of the 18 registered blind employed persons noted above:

Occupation	Place of Employment			Total
	Work-shops	House	Elsewhere	
Basket Workers	4	—	—	4
Mat Makers	1	—	—	1
Brush Makers	3	—	—	3
Viewers, Inspectors, Testers	1	—	—	1
Labourers	1	—	—	1
Machine Knitters	2	—	—	2
Telephone Operators	—	—	1	1
Typists	—	—	2	2
Machine Tool Operators	—	—	1	1
Chair Seaters	—	—	2	2
Totals	12	—	6	18

The following table indicates the position of the remaining 231 unemployed registered blind persons with respect to training and capability for employment.

Classification	Males	Females	Total
Under Training	—	1	1
Unemployed but capable of and available for work—			
Already trained	4	—	4
Subject to being trained	1	—	1
Without Training	—	—	—
Not Available for Work	7	23	30
Not Capable of Work	11	11	22
Not Working (all over 65 years of age)	69	104	173
Totals	92	139	231

Forty-seven of the persons registered as blind also suffered additional disabilities as indicated in the table below:

	<i>Males</i>	<i>Females</i>	<i>Total</i>
Mentally ill	1	—	1
Mentally Sub-normal	2	1	3
Physically defective.....	11	12	23
Deaf without speech	—	—	—
Deaf with speech	1	2	3
Hard of hearing	5	12	17
Physically defective and deaf or partially deaf	—	—	—
Totals	20	27	47

21 persons are maintained in residential accommodation, i.e. 8 in homes for the blind, 5 in other homes provided under Part III of the National Assistance Act, 1948, 4 in hospitals for mentally ill, 1 in hospital for mentally sub-normal and 3 in other hospitals.

(b) Registered Partially Sighted Persons.

During the year, 30 completed B.D.8 forms were received by the Medical Officer of Health in respect of partially sighted persons.

On the 1st January, 1965, there were 98 persons registered as partially sighted. 9 new cases and 1 transferred from out of the Borough were admitted to the register during the year. 15 names were removed from the register (7 deaths, 7 transferred to register of Blindness, and 1 transferred out of the Borough). Thus at the 31st December, 1965, there were 93 persons registered as partially sighted within the Borough.

The following analysis gives the information concerning these persons by age groups:—

Age Distribution		<i>Males</i>	<i>Females</i>	<i>Total</i>
5-15	.....	3	1	4
16-20	.....	3	1	4
21-49	.....	13	6	19
50-64	.....	3	1	4
65 and over	.....	20	42	62
		—	—	—
		42	51	93
		—	—	—

Educational and Occupational Distribution

The following analysis shows the different states of occupation of the 93 partially sighted persons:

(a) Persons over 16 years of age—		<i>Males</i>	<i>Females</i>	<i>Total</i>
(i) Available for work	.....	2	2	4
(ii) Not available for or not capable of work	.....	6	16	22
(iii) Employed	.....	5	2	7
(iv) Undergoing training	.....	1	—	1
(v) Requiring observation only	.....	25	30	55
		—	—	—
		39	50	89
		—	—	—

(b) Persons under 16 years of age—		<i>Males</i>	<i>Females</i>	<i>Total</i>
(i) Attending Special School	.....	—	1	1
(ii) Attending other schools	.....	1	—	1
(iii) Not at School	.....	2	—	2
(iv) Ineducable	.....	—	—	—
		—	1	4
		—	—	—

Particulars of Cases Examined

The following table shows the analysis of completed forms B.D.8 received by the Medical Officer of Health during 1965, in respect of Blind and Partially Sighted Persons.

(i) Number of cases registered or re-examined during the year in respect of which Forms B.D.8 recommends:	Cause of Disability							
	Cataract		Glaucoma		Retrolental Fibroplasia		Others	
	M	F	M	F	M	F	M	F
BLIND								
(a) No treatment	7	7	1	1	—	—	3	2
(b) Treatment (medical, surgical or optical)	6	2	1	3	—	—	1	—
PARTIALLY SIGHTED								
(a) No treatment	—	—	—	—	—	—	1	—
(b) Treatment (medical, surgical or optical)	10	14	1	—	—	—	2	2
(ii) Number of cases under (i) above which on follow-up action have received treatment:								
(a) Blind cases	3	2	1	—	—	—	1	1
(b) Partially sighted cases	8	10	—	—	—	—	—	—

Source of Notification.

34 persons for whom new Certificates B.D.8 were issued were ascertained as follows:

	Blind	Partially Sighted	Sighted	Un-classified
Welfare Staffs (including Home Teachers for the Blind)	9	3	—	—
Own General Practitioner	2	2	—	—
Personal Request	2	1	—	—
National Assistance Board	2	1	—	—
Other Lay Source	4	—	—	—
Hospitals	3	1	—	—
Other Medical Source	3	1	—	—
Total	25	9	—	—

It will be seen that Welfare Department Staffs were responsible for 12 of the 34 notifications received and of those 12, 9 were found to be blind persons.

Acknowledgment is made to Mr. A. S. Underhill, Chief Welfare Officer for the information contained in the above Section.

XVI.—GENERAL PROVISION BY THE HEALTH AND WELFARE SERVICES FOR THE CARE OF HANDICAPPED PERSONS INCLUDING EPILEPTIC AND SPASTIC PERSONS

The welfare provision for the care of handicapped persons, including Epileptics and Spastics, is undertaken by the Welfare Services Committee of the Council in accordance with the scheme approved by the Ministry of Health on 24th May, 1954.

At the end of 1964 there were 449 persons substantially and permanently handicapped on the register. Twenty-five new registrations were effected during the year, 14 deaths occurred and 6 removals outside the Borough, making the resultant total of 454 at the end of December, 1965.

HANDICAPPED PERSONS

(a) Classification in relation to defect

Details of the numbers and classification of known handicapped persons in St. Helens are given below. These are classified under the appropriate Medical Research Council code and the figures shown in parenthesis denote the numbers who suffer from dual disabilities, e.g. deaf and partially sighted, blind and epileptic, etc.

Table H.P.1.

**Details of registered handicapped persons in St. Helens
classified in accordance with disability.**

DISABILITY	Code	Male	Female	Total
Amputation	A/E	23(2)	4	27
Arthritis and Rheumatism	F	17(3)	19(3)	36
Congenital Malformations and Deformities	G	22	13(2)	35
Diseases of the Digestive and Genito-Urinary Systems; of the Heart or Circulatory System ; of the Respiratory System (other than T.B.); and of the skin	H/L	73(5)	12	85
Injuries of the head, face, neck, thorax, abdomen, pelvis or trunk. Also injuries or diseases (other than T.B.) of the upper and lower limbs and of the spine	Q/T	68(10)	15	83
Organic Nervous Diseases— Epilepsy, Disseminated Sclerosis, Polio-myelitis, Hemiplegia, Sciatica, etc.	V	61(5)	36	97
Neuroses, Psychoses and other Nervous and Mental Disorders not included in V	U/W	25	12(2)	37
Tuberculosis (Respiratory)	X	15(1)	3(1)	18
Tuberculosis (Non-Respiratory)	Y	—	2	2
Diseases and Injuries not specified above	Z	25(—)	9(1)	34
Totals		329(26)	125(9)	454

The Welfare Services Department acts as liaison between statutory and voluntary services so that the registered handicapped persons derive maximum benefit. At the end of 1965 there were 56 handicapped persons on the attendance register of the Social Centre at the Congregational Hall, although the average weekly attendance fell to 33, which was mainly due to sickness. It was observed that the younger handicapped person had a preference for handicrafts, while the older handicapped person had a preference for the social activities.

During the summer the handicapped persons attending the Centre were invited to two outings, the first to Llandudno and the second to Rhyl. Arrangements were also made for a party to go to see a pantomime in Manchester. A Christmas Party was held at the Congregational Hall, where tea was provided, followed by suitable entertainment, games and a film show. In addition the Welfare Services Committee provided each registered handicapped person who attended the Centre with a Christmas gift. Three taxis are provided weekly to transport the more severely disabled persons to the Centre.

(b) Grouping in relation to employability

The following table H.P.2 shows the grouping of the handicapped persons in relation to their employability. These are classified by sex in the five recognised employability groups.

Table H.P.2.

Age Group	Employability Group	Code	Male	Female	Total
Persons aged 16 & upwards	Capable of work under ordinary industrial conditions	A	194	33	227
	Incapable of work under ordinary industrial conditions but mobile and capable of work in sheltered workshops	B	63	24	87
	Incapable of work under ordinary industrial conditions and insufficiently mobile for work in sheltered workshops but capable of work at home	C	7	9	16
	Incapable of or not available for work	D	64	59	123
Children under the age of 16 years	Whose needs are likely to be met under other enactments but for whom the L.A. have a general responsibility under S.29 of the National Assistance Act, 1948	E	1	—	1
	Totals		329	125	454

Transport

Motorised tricycles and hand-propelled wheelchairs, together with garages and a concrete base for the garage, are provided free of charge by the Ministry of Health in approved cases. Should further adaptations to the site be necessary these can be carried out by the Welfare Department, and it is a matter of regret that the Welfare Committee are under an obligation to make an assessment towards the recovery of the costs incurred. On the occasions when the adaptations are carried out privately by the disabled person he has to meet the entire cost.

Adaptations

During the year adaptations were carried out at the homes of four handicapped persons to enable them to live more normal lives in their own surroundings. Gadgets can be purchased to assist the handicapped in overcoming their disability. Approval is in all cases required from the handicapped person's general practitioner.

Wheelchairs

Wheelchairs are available on loan from the Welfare Services Department for a limited period. No charge is made for this service.

Car Badges for Severely Disabled Drivers

Application for car badges are received at the Welfare Services Department from disabled persons who suffer from a permanent and substantial disability that causes severe difficulty in walking.

Epileptics

During the year ten epileptics were in accommodation provided by the Welfare Authority. Of these four males and three females were in colonies administered by Voluntary Organisations and two males and one female in accommodation administered by the Local Authority. There were thirty-six known cases of epilepsy registered with the Department. Of these, twenty-six were males and ten females.

Table H.P.3.
**Number of registered Epileptics under
Classification V. of Table H.P. 1.**

	Employed	Un-Employed	Total
Males	5 (1)	21 (4)	26
Females	1	9	10
Total	6	30	36

CO-ORDINATION OF THE WELFARE OF AGED PERSONS

Since 1954 the Welfare Services Committee of the Council has operated a Scheme for the Care of the Aged living within the Borough. During the year under review a further 193 elderly persons were registered, 79 deaths were recorded of the registered aged, and 9 aged persons left the district to live with relatives.

On the 31st December, 1965, the Department was responsible for the welfare of 1,520 elderly persons. Of these 219 were in residential care, 165 Deaf or Hard of Hearing registered with the Society for the Deaf, 245 registered Blind or Partially Sighted, 6 were visited by visitors from voluntary organisations and the remaining 885 were visited in their homes by officers of the Welfare Department.

During 1965 the staff of the Welfare Department made 5,940 visits to the elderly, together with 76 visits by voluntary organisations. The elderly Blind were visited in hospital by the Home Teachers and the elderly deaf in hospital were visited by the Chaplain for the Deaf.

Residential Accommodation

During the year 1965, 69 of the elderly persons known to the Department became in need of care and attention and were admitted into residential accommodation, 8 having to be placed outside the Borough whilst the remaining 61 were provided with accommodation in local homes. During the year under review 11 aged persons were admitted to the Council's homes for a temporary period to enable their relatives who would normally care for them at home to partake of annual holidays or to enter hospital. There are now 219 persons in Part III Accommodation, all of whom are visited at least once per year by the Welfare Services Visiting Sub-Committee.

The following table indicates the placement of persons in residential accommodations provided in compliance with Section 21 (1) (a) of the National Assistance Act, 1948.

	<i>Males</i>	<i>Females</i>	<i>Total</i>
St. Helens County Borough Council	69	89	158
Other Local Authorities	4	—	4
Voluntary Organisations	30	27	57
	103	116	219

Other Services

As a result of regular visiting of the aged, many instances came to light where the needs could only be met by the National Assistance Board, Nationalised undertakings, various Corporation Departments or Voluntary Organisations. The co-operation of the Welfare Department with all these services is a regular feature of the Scheme, and in this manner the varying needs of the aged can be satisfied.

I should like to express appreciation to the General Practitioners who have willingly advised and sought the assistance of the Department concerning their patient's welfare, also to the Clergy, who have at all times attended to the spiritual needs of the elderly whenever cases have been brought to their attention.

Meals on Wheels

The Meals on Wheels Service commenced in 1956, the meals being prepared at the Council's Homes and the Town Hall Canteen and delivered

over four days per week. During the year under review Moss Bank Home prepared 3,978 hot meals, Nutgrove Hall Home 3,818 hot meals, Ashtons Green Home 3,846 hot meals and the Town Hall Canteen 2,040 hot meals, making a resultant total of 13,682 meals.

Transport is provided from three sources—the Rotary Club of St. Helens distributing from Nutgrove Hall Home, the W.V.S. van distributing from Moss Bank Home and the Town Hall Canteen. On those days when the W.V.S. van is engaged at the Town Hall Canteen, delivery from Moss Bank Home is effected by paid taxi service. Distribution from Ashtons Green Home is also by paid taxi service. The Welfare Services Committee make an annual grant to the W.V.S. who organise the service for reimbursement of transport facilities. The charge per meal to the elderly was maintained at 1s. 0d. per meal and the traditional Christmas fare was again available without cost to the recipient.

Launderette Service

The concessionary service available through the Bendix Launderette was continued during the year under review. This entitles pensioners to use the service at off peak periods at a special reduced rate of 2s. 3d. per 9 lbs. washing load. The service is available once per fortnight on Thursdays and Fridays at each of the Town's launderettes. In the case of housebound elderly persons who cannot attend at the launderette personally, ladies of the W.V.S. collect and deliver laundry and during the year over 1,000 collections were made.

Protection of Property

Where an elderly person is admitted to hospital and no suitable arrangements can be made by the patient for the protection of the movable property contained in the house, protection can be undertaken by this Department. On the death of an elderly person, where no satisfactory arrangements had otherwise been made, the burial was undertaken by the Committee.

Wheelchairs.

The Department has fourteen wheelchairs, which are available for use by aged and infirm persons or for loan to relatives who wish to take their parents out during holiday periods. The service is free and all that is asked is that the chairs are maintained in good condition when in use. During the year the chairs have been continually in use.

Pre-paid Postcards

As each pensioner is registered they are issued with a pre-paid postcard in order to summon assistance before the next visit is due by the visitor. During the year many of the registered persons returned their card to the Department for various needs and degrees of urgency.

Acknowledgement is made to Mr. A. S. Underhill, Chief Welfare Officer, for the information contained in the above section.

XVII.—INSPECTION AND SUPERVISION OF FOOD

Meat and Other Foods. The inspection and supervision of all meat at the Public Abattoir is carried out by qualified meat inspectors.

Table S.I.1.
CARCASES INSPECTED DURING 1965.

PUBLIC ABATTOIR					
	Cattle excluding cows	Cows	Calves	Sheep and Lambs	Pigs
Number killed	3779	3000	26	8514	—
Number inspected	3779	3000	26	8514	—
Condemned:					
(a) All diseases except Tuberculosis and Cysticerci—					
(i) Whole carcasses condemned	1	1	5	1	41
(ii) Carcasses of which some part or organ was condemned	564	1129	—	1738	—
(iii) Percentage of number inspected affected with disease other than tuberculosis	14.9%	37.6%	19.2%	20.4%	41.5%
(b) Tuberculosis only:					
(i) Whole carcasses condemned	—	—	—	—	—
(ii) Carcasses of which some part or organ was condemned	—	—	—	—	12
(iii) Percentage of the number inspected affected with tuberculosis	—	—	—	—	0.1%
Cysticercosis:					
Carcasses of which some part or organ was condemned	—	—	—	—	—
Carcasses submitted to treatment by refrigeration	—	—	—	—	—
Generalised and totally condemned	—	—	—	—	—

Table S.I.1 gives details of the results of such inspection.

Under the Slaughter of Animals Act, 1958, 24 slaughtermen's licences were renewed for the year ended 31st December, 1965, and 1 new application for a slaughterman's licence was approved.

At the end of the year, 190 premises were registered under Section 127 of the St. Helens Corporation Act, 1933, for the preparation or manufacture of potted, pressed, pickled or preserved meat, fish, or other food intended for the purpose of sale.

During 1965, 5,138 visits were made by Inspectors to shops, stalls and other places where food is prepared or stored.

Merchandise Marks Act, 1926 and Orders.—Infringements of the Merchandise Marks Orders were dealt with by verbal warnings.

Food Hawkers.—Section 47 of the St. Helens Corporation (Electricity and General Powers) Act, 1948, requires the registration of any person (other than a person keeping open shop) who sells, offers or exposes for sale food from any vehicle or receptacle. The section also requires the registration of storage accommodation for any food intended for any of these purposes.

At the end of the year 83 persons and 85 separate sets of premises were registered under this section.

Food Hygiene (General) Regulations, 1960, and Clean Food Campaign.

During 1965, sixty-one plans showing major works to food premises were examined and observations made to the persons submitting them. It is regretted, however, that on subsequent inspection of some of these premises it was found that a number of the recommendations had not been given to the contractors to carry out, thus extra time had to be spent on rectifying these omissions.

The Food Hygiene Inspectors continued to carry out the initial inspection of food premises registered under the Offices, Shops and Railway Premises Act, 1963. Advisory reports had been sent to the occupiers of the majority of these premises by the end of the year.

As a number of market stalls had to be registered under the Offices, Shops and Railway Premises Act, a complete survey of the food stalls in the Market Hall and Covered Market was made. Integrated requirements were compiled and the stalls, where possible, were provided with individual sinks and washing facilities as well as other improvements.

A survey of food shops owned by the local authority was made and lists of requirements sent to the occupiers and the departments concerned.

Following a complete survey made in 1964 of the school canteens and dining centres in the Borough, tenders were obtained by the Director of Education in 1965 for carrying out all the listed requirements. By the end of the year considerable progress had been made in re-equipping and modernising these kitchens.

Some aspects of food hygiene work had to be curtailed due to the absence of the Food and Drugs Inspector from duty over the last six months of the year. The work of this Inspector had to be shared between the Food Hygiene Inspectors.

The following table indicates the position in regard to the provision of washing facilities (Regulation 16) and sinks (Regulation 19) in food premises in the Borough.

Type of Premises	Number	No. complying with Reg. 16	No. to which Reg. 19 applies	No. complying with Reg. 19
Grocer/General Shops	406	307	373	294
Sweet Shops	75	67	—	29
Butchers	87	69	87	84
Confectioners	62	48	62	60
Greengrocery and Wet Fish Shops	68	62	68	66
Registered Clubs	64	64	64	64
Licensed Premises	179	158	164	164
Fried Fish Shops.....	71	63	63	63
Snack Bars and Cafes, etc.	45	44	45	45
Industrial Canteens	46	46	46	46
School Canteens	42	41	42	42
Food Preparing Premises	17	17	17	17
Food Warehouses	17	13	14	14
Market Stalls	42	37	36	33
Bakehouses	43	41	43	43

Premises registered under Local Acts.

The following are the particulars of food premises in the Borough registered under local Acts together with the numbers of inspections made in respect of each of these classes of premises:—

	No. of Premises	No. of Inspections
(a) St. Helens Corporation Act, 1933—Section 127—Premises used for the preparation or manufacture of potted, pressed, pickled or preserved meat, fish or other foods	190	467
(b) St. Helens Corporation Act, 1933—Section 133— (1) Premises used for the manufacture and sale of ice cream	3 294 }	324
(c) St. Helens Corporation (Electricity and General Powers) Act, 1948—Section 47. Premises used by hawkers of food as storage accommodation	85	152

Premises registered under Milk and Dairies (General) Regulations, 1959.

Premises used as dairies.....

13

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Disposal of Condemned Food.

Condemned meat and offals from the Public Abattoir are disposed of to a firm of animal foodstuffs and fertilisers manufacturers. This firm has given a guarantee that no raw meat will be sold to pet shops and that adequate steps will be taken for preventing the meat from getting into unauthorised hands. All condemned meat and offals are treated with a suitable colouring agent before release from the Public Abattoir.

Other classes of condemned foodstuffs are dealt with by treatment with disinfectant for the purpose of rendering them unmarketable, and along with canned goods are conveyed to the municipal refuse tip and buried. Strict supervision is maintained.

The following are the total quantities of various classes of foodstuffs which were condemned during the year at the abattoir, or in shops, etc., owing to being diseased or unsound:

MILK AND MILK PRODUCTS

Milk and Dairies (General) Regulations, 1959.

At the end of the year there were registered under these Regulations:

16 persons as distributors of milk from dairy premises;
257 persons as distributors of milk in sealed bottles only from
shops; and
13 premises as dairies.

Most of the milk received into dairy premises in St. Helens is delivered to those premises in sealed bottles. The administration of these Regulations does not now, therefore, constitute a serious problem.

152 visits were paid by the Public Health Inspectors to these premises during the year.

Milk (Special Designation) Regulations, 1963.

The following licences were in operation during the year under these Regulations:—

Dealers' Licences authorising the use of the special designation "STERILISED"	252
Dealers' Licences authorising the use of the special designation "PASTEURISED"	132

Dealer's (Pasteuriser's) Licence authorising the use of the special designation "PASTEURISED"

1

Biological Examination of Milk.—In the routine examination of milk supplies 34 samples were examined by guinea-pig inoculation for the presence of tubercle bacilli. All were reported negative. 42 samples were also examined for brucella abortus. All were reported negative.

Bacteriological Examination of Milk.—In addition to the samples of milk taken for examination for tubercle bacilli, 42 samples of untreated milk were also taken for the methylene blue reduction test. The results of these examinations showed that 7 samples failed to satisfy the Methylene Blue Test required by the Regulations.

105 samples of pasteurised milk were also examined for the methylene blue (30 minutes) test. 1 sample failed to satisfy the test.

Examination of Milk for the presence of Phosphatase.—105 samples of milk were also examined during the year for the presence of phosphatase. All the samples passed this test.

Turbidity Test for Sterilised Milk.—During the year 41 samples were submitted for this test. All were reported to be satisfactory.

Milk-in-Schools Scheme.—All milk now supplied to schools under the Milk-in-Schools Scheme is milk for which a pasteuriser's licence has been granted. Careful supervision is exercised by the Public Health Inspectors and frequent samples are taken for chemical examination and for examination for bacterial contamination.

The number of samples taken during 1965 and the results are as follows:

1. Samples taken for chemical analysis	.....	.....	.....	.....	.....	157
Number reported below standard	.....	.....	.....	.....	.....	nil
2. Samples examined for bacteriological cleanliness	.....	.....	.....	.....	.....	14
Number reported to be unsatisfactory	.....	.....	.....	.....	.....	nil
3. Samples examined for the presence of tubercle bacilli	.....	.....	.....	.....	.....	1
Number in which tubercle bacilli was found	.....	.....	.....	.....	.....	nil

Bacteriological Examination of Cream

In conjunction with the Public Health Laboratory the Methylene Blue Test was applied to 6 samples of cream.

2 samples were reported as unsatisfactory.

Once again the results in regard to samples of cream, indicate that not enough attention is being paid to the bacteriological quality of this food. Either the Methylene Blue Test is not satisfactory as a means of indicating this quality or else the product is in urgent need of cleaning up bacteriologically. As the cream in many cases is double pasteurised an unsatisfactory result should be a rarity providing that transportation and distribution are satisfactory. At a time when extensive advertising of cream as a food is being undertaken, the sampling results do not justify this food being priced in the luxury class.

It is obvious that more clarification of the bacteriological condition of cream is required and more sampling of this commodity is necessary.

Ice Cream Premises.—The following are the particulars at the end of the year of registrations under the St. Helens Corporation Act, 1933, of manufacturers and vendors of ice cream and the premises used by them:—

Manufacturers and Vendors .....	.....	.....	.....	.....	.....	3
Vendors only .....	.....	.....	.....	.....	.....	270
Premises for manufacture and sale .....	.....	.....	.....	.....	.....	3
Premises for sale only .....	.....	.....	.....	.....	.....	294

The 270 vendors mentioned above sell ice cream in wrapped packages only.

64 samples of ice cream were taken during the year for bacteriological examination by the Methylene Blue Test. These samples were taken from manufacturers and vendors whose premises are situate both inside and outside the Borough.

Results of Ice Cream Sampling

	Grade	Grade	Grade	Grade
	1	2	3	4
Producers outside the Borough	27	4	2	1
Producers inside the Borough	24	3	1	2
	51	7	3	3

A number of vehicles equipped to sell soft ice cream have commenced trading in the Borough. This type of retailing necessitated the quality of the ice cream being allied to each vehicle due to the freezing of the product in transit and the need for individual sterilisation of the plant before and after use in the vehicle.

5 samples were taken for bacteriological examination and were reported satisfactory.

12 samples of Lolly Ices were taken during the year for bacteriological examination and were reported to be satisfactory.

The comparator test with litmus paper was applied during the year to 12 samples of ice lollies as a check on their pH. value.

All vehicles used for the sale of ice-cream are provided with satisfactory supplies of hot and cold water and suitable washing facilities.

During the year, 324 visits of inspection were made to ice cream premises in St. Helens.

FOOD AND DRUGS.

Food and Drugs Act, 1955.—During 1965, 103 formal samples and 177 informal samples of various foods and drugs were submitted to the Public Analyst, and 2 (1.6%) were reported as adulterated.

One prosecution was taken during the year resulting in the offender being fined £5. This case was concerned with the presence of a piece of metal in a hot-pot pie.

During the year seven offenders were officially warned by the Local Authority. These cases related to quality of milk in two instances, cake containing wood, mustard with rust, sweet confection containing glass, mince-meat containing waterproof dressing and steak and kidney pie containing fly.

Informal action was taken with manufacturers and retailers in regard to three samples of food resulting in the contraventions being remedied.

The Public Analyst also examined 8 samples of untreated milk for the presence of antibiotics. All were reported negative.

Five samples of fruit and vegetables grown locally were examined for residues of pesticides which may have been used during cultivation. No residues were reported on them.

Complaints were received on 15 occasions in respect of food. In each case the complaints were fully investigated and appropriate action taken with responsible persons.

Food Hygiene (General) Regulations, 1960.

One prosecution was taken during the year against a hot dog vendor and his employer. Seven counts were proceeded with and fines totalling £24 were imposed by the Court.

The Condensed Milk Regulations, 1959.

The Dried Milk Regulations, 1965.

No infringements of these Regulations were found during the year.

Preservatives in Food Regulations, 1962.—All samples submitted to the Public Analyst under the Food and Drugs Act, were also examined for the presence of preservatives.

The Liquid Egg (Pasteurisation) Regulations, 1963.

There are no egg pasteurisation plants in the Borough. No samples were taken during the year. These regulations would appear to present no great problem locally due to the high number of premises using shell eggs and the rest using British Lion Brand. No imported liquid egg was in use during the year.

Fertilizers and Feeding Stuffs Act, 1926.—7 samples of fertilizer were taken under the above Act during the year. The attention of the retailers was drawn in 2 cases to the condition of the samples.

Pharmacy and Poisons Act, 1933.—At the end of the year there were 34 persons entered in the Local Authority's list of persons entitled to sell poisons included in Part II of the Poisons List. The number of premises concerned was 79.

123 visits were paid to these premises and no infringements of the Act were found.

Pharmacy and Medicines Act, 1941.—No infringements of this Act were found during the year.

Bakehouses.—There are 43 bakehouses in St. Helens and mechanical power is employed in 43 instances.

141 visits of inspection to these premises were made during the year.

DISEASES OF ANIMALS ACTS.

Tuberculosis Order, 1964.—No cases under this Order were reported during the year.

Anthrax.—One suspected case of Anthrax was reported but not confirmed.

Swine Fever.—3 cases of suspected Swine Fever were reported, but none were confirmed.

Foot and Mouth Disease.—No cases of Foot and Mouth Disease were reported during the year.

Fowl Pest.—No cases of Fowl Pest were reported during the year.

XVIII.—SANITARY CIRCUMSTANCES OF THE AREA.

WATER.—The water supply is from deep wells and boreholes in new red sandstone at Eccleston Hill, Whiston, Knowsley, Kirkby and Melling, supplemented by a supply from the Liverpool Corporation Rivington Main, and water from red sandstone above the coal measures at Clock Face and Collins Green. The water from the last-mentioned source is subjected to chlorination and high pressure filtration before distribution.

Water

- (1) Carr Mill industrial water supply to British Sidac is now being used at the rate of $\frac{2}{3}$ million gallons per day approximately.
- (2) Work is now nearing completion on the new Treatment Works at Knowsley Pumping Station, which will provide softened water to the Brown Edge Reservoirs, Eccleston, northern area of St. Helens and districts of Rainford and Billinge.
- (3) Two hundred and twenty yards of 12" and twenty-two yards of 18" watermain has been laid in Prescot Road as part of a new trunk main which will bring more water into the town and also boost up the pressures slightly.
- (4) Two hundred and twenty yards of 15" watermain has been laid in Whittle Street, Cairo Street, Elm Road and Dorothy Street as part of the High Level Scheme to supply water to the Sutton Heath and Dorothy Street Housing Sites.
- (5) The following new watermains have been laid in the St. Helens area during 1965:

<i>Location</i>	<i>Size</i>	<i>Length in yards</i>
Duncan Street	3"	40
Swinburne Road	3"	84
Dorothy Street	3"	8
Baxters Lane	3"	240
	6"	219
Easington Road	4"	10
	8"	30
Broadway	3"	304
	4"	134
	6"	159
Beaufort Street	3"	20
Merton Bank Road	3"	54
	6"	166
Leopold Street	2"	6
	3"	100
Kenwright's Site	3"	60
	4"	44
Washway Lane	6"	70
Humber Crescent	3"	10
	4"	50

<i>Location</i>	<i>Size</i>	<i>Length in yards</i>
Inner Ring Road.....	8"	18
Martindale Road	6"	6
	8"	156
New Street	6"	150
Chancery Lane	4"	69
Sutton Heath Road Site	3"	12
	4"	142
	8"	108
Thatto Heath Bridge (temporary diversion)	12"	180
Clock Face Road	3"	16
Grimshaw Street.....	3"	16
Warrington Old Road	10"	37
Clovelly Avenue	3"	32
Westfield Street	8"	388
Walkers Lane Site	4"	84
Sandringham Drive	3"	30

The principal mains extensions carried out during the year totalled 3,252 lineal yards.

Some 31,889 dwelling houses in the Borough (population 104,440) were supplied direct from public water mains throughout the year. There are no stand pipes in the area.

The supply has been satisfactory in both quality and quantity throughout the year. Bacteriological examinations of the water were made at regular intervals at the sources of supply, and at the reservoirs prior to distribution into supply, in all cases after chlorination. The number of samples examined during the year was 480, and all proved to be satisfactory.

In addition, 13 samples of tap water were submitted by the Public Health Inspector's Department for bacteriological examination.

85 samples of water taken for chemical analysis were reported satisfactory.

The water supplied has no plumbo-solvent action.

Owing to the small amount of fluoride present and the cost per sample involved, no samples were taken during the year.

All supplies are chlorinated before distribution.

RIVERS AND STREAMS.—The supervision of rivers and streams in St. Helens is carried out by the Mersey and Weaver River Board.

DRAINAGE AND SEWERAGE

During the year work has proceeded on the following schemes:

(a) Main Intercepting Sewer—Peasley Cross Section

The scheme for the reconstruction of the existing and provision of new lengths of foul and surface water sewers in the Peasley Cross Lane/Warrington Old Road area is now substantially complete. The final details for the construction of a foul sewage pumping station have been approved and work should start on this by the middle of 1966. When completed the whole scheme will provide foul and surface water sewerage facilities for the new Peasley Cross Industrial Site and for the new Peasley Works of United Glass Ltd., besides eliminating the habitual flooding of Peasley Cross Railway Bridge, so far as this has been due to the adverse effects of mining subsidence on the main drainage system.

(b) Thatto Heath Intercepting Sewer

The scheme for the reconstruction of the combined sewer from Liverpool Road to Thatto Heath is now proceeding.

On completion this will provide a new sewerage system for the Thatto Heath Area, the existing sewers from which area are heavily overloaded at storm time, causing flooding in the Alexandra Drive and Whittle Street areas.

(c) Walkers Lane Sewers

New foul and surface water sewers in Walkers Lane, Sutton Manor, have been laid to provide drainage for an area of private housing development which is currently proceeding.

(d) Moss Bank Sewage Works Abandonment

Work has now commenced on a new carrier sewer which will eliminate the small sewage disposal works at Moss Bank and convey the flow to the Haresfinch Intercepting sewer for treatment at Parr Sewage Works.

CLOSET ACCOMMODATION.—At the end of 1965 there were still in use 51 privy middens serving 83 premises, and 116 pail closets serving 101 premises.

PUBLIC CLEANSING

Another compression type refuse collection vehicle was put into use during 1965. The total number of this type now in use is 6. Further bulk storage refuse containers were supplied during the year and the total now in use is 121.

The total refuse collected in the Borough was disposed of by controlled tipping at the Southport Street site.

HOUSE REFUSE ACCOMMODATION.—The scheme for the provision and maintenance of dustbins and the abolition of ashpits is now in operation throughout the Borough.

Staff shortage again seriously curtailed that part of the programme dealing with the abolition of fixed ashpits. By the end of the year 205 ashpits serving 375 houses had been demolished or converted under the scheme.

TAYLOR PARK PADDLING POOL.—4 samples were taken of the water in this pool for bacteriological examination. Treatment of the water was carried out at intervals throughout the summer months under the supervision of the Public Health Inspector's Department. 5 samples were also taken of the water in the boating pool, which is used for swimming during the summer months, 2 samples from the drinking fountain, and 1 from the workmen's cabin.

SWIMMING BATHS — BOUNDARY ROAD.—During the year samples have been submitted for bacteriological examination at weekly intervals and for chemical analysis at monthly intervals. The condition of the water has continued to be satisfactory.

In addition, 9 samples were taken by Public Health Inspectors and proved to be satisfactory.

ATMOSPHERIC POLLUTION.—For the measurement of atmospheric pollution in St. Helens, the following observation stations are now maintained:

Albion Street Clinic	Smoke Filter and Sulphur Dioxide Apparatus
Public Health Inspector's Office, Hardshaw Street	do.
Carr Mill Clinic	do.
Sutton Library	do.
Thatto Heath Library	do.
Jersey Street Clinic	do.

The first three stations are maintained in conjunction with the National Survey of Atmospheric Pollution being investigated by the Department of Scientific and Industrial Research. A fourth instrument required under the Survey has not yet been installed due to the lack of a suitable building on the site required. 464 observations were taken of industrial chimneys and 68 visits to boiler plants were made during the year.

SMOKE CONTROL

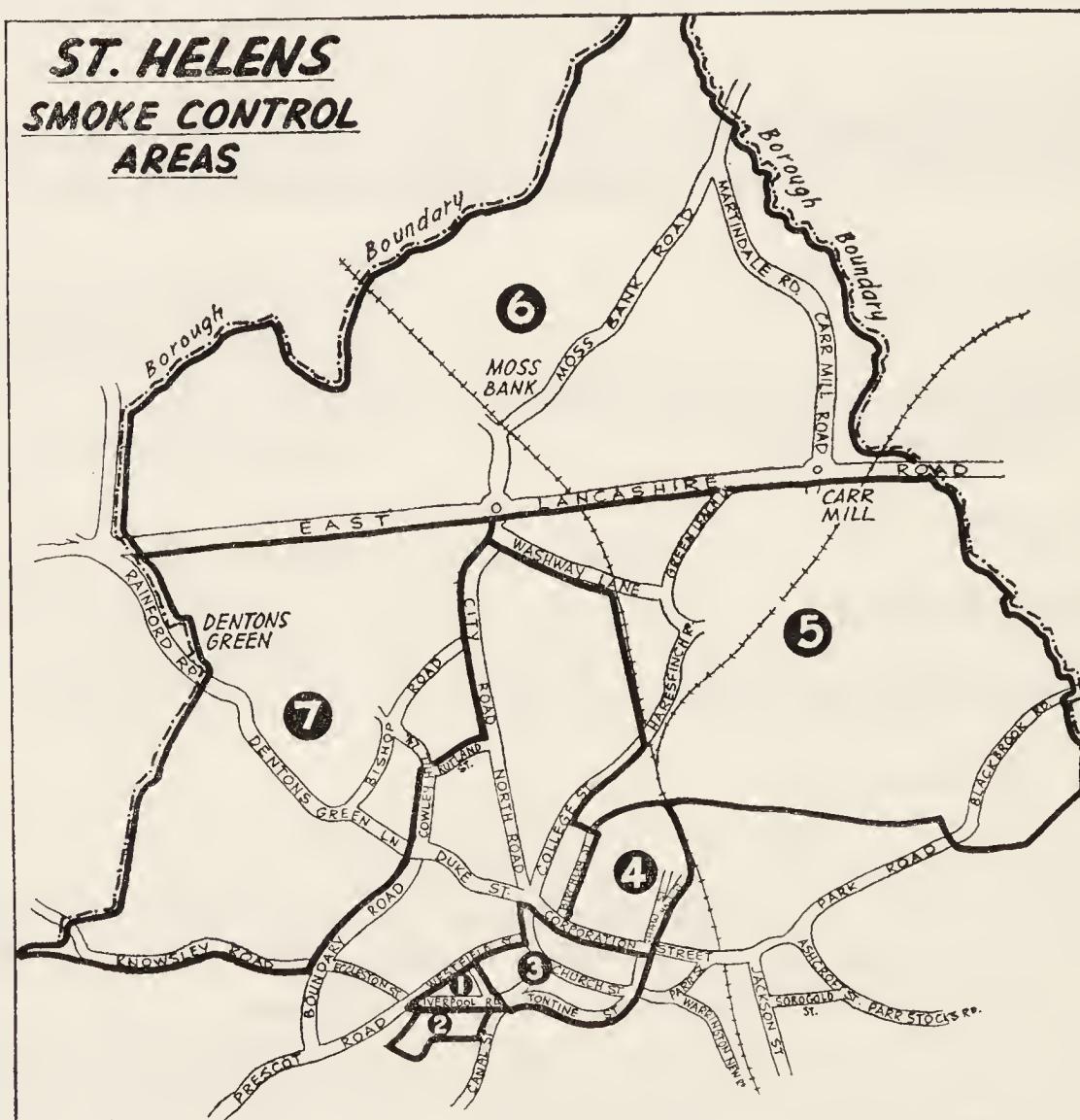
Consequent upon some stability continuing in regard to staff, fuel supplies, prices, etc., the Chief Public Health Inspector presented the Local Authority with a completely revised programme for declaring Smoke Control Areas for the years 1965, 1966 and 1967.

The three year programme is for trial purposes only to gain practical experience in adaptations, administration, assessing the capabilities of the labour force available and to arrive at some definite costings based on the need for more expensive appliances. It was envisaged that after this programme progress would be greatly accelerated to cover the whole town.

The programme is as follows:—

	Orders to be made during 1965	Orders to be made during 1966	Orders to be made during 1967	3 year target
Area Nos	1, 2, 3, 4	5	6	
Total Premises	1778	2359	2708	6845
Dwellings	1297	2334	2698	6329
Acreage	137.55	714.58	1148.78	2000.91

The following map indicates the areas concerned:—



By the end of 1965 the four areas scheduled to be dealt with in that year had been declared by the Local Authority. Area No. 1 was awaiting confirmation by the Ministry and Orders for Areas Nos. 2, 3 and 4 were ready to be sent for confirmation. The declaration of these four areas necessitated 2,657 visits being made by Public Health Inspectors.

To eventually speed up the administration, discussions were held with the trade and fixed prices were agreed for installation. Special notices to occupiers were drafted, setting out formal approval to works previously arranged to be carried out based on the occupiers choice of fuel and appliance. This procedure greatly streamlined the paper-work involved.

Factories.—14 defects were reported by H.M. Inspector of Factories during the year. A total of 363 visits of inspection were made to factories during 1965.

Table S.I.2. gives particulars of the administrative action taken under the Factories Act, 1961.

Table S.I.2.

PART I OF THE ACT

1.—INSPECTIONS for purposes of provisions as to health (including inspections made by Public Health Inspectors).

Premises	Number on Register	Number of		
		Inspections	Written notices	Occupiers prosecuted
(i) Factories in which Sections 1, 2, 3, 4 and 6 are to be enforced by Local Authorities	29	22	2	—
(ii) Factories not included in (i) in which Section 7 is enforced by the Local Authority	323	341	33	—
(iii) Other Premises in which Section 7 is enforced by the Local Authority (excluding out-workers' premises)	16	—	—	—
TOTAL	368	363	35	—

2.—CASES IN WHICH DEFECTS WERE FOUND.

(If defects are discovered at the premises on two, three or more separate occasions they are reckoned as two, three, or more "cases").

Particulars	No. of cases in which defects were found				Number of cases in which prosecutions were instituted
	Found	Remedied	Referred To H.M. Inspector	By H.M. Inspector	
Want of cleanliness (S.1)	—	—	—	—	—
Overcrowding (S.2)	—	—	—	—	—
Unreasonable temperature (S.3)	1	—	—	—	—
Inadequate ventilation (S.4)	2	—	—	—	—
Ineffective drainage of floors (S.6)	—	—	—	—	—
Sanitary Conveniences (S.7)					
(a) Insufficient	1	7	—	3	—
(b) Unsuitable or defective	26	19	—	11	—
(c) Not separate for sexes	—	—	—	—	—
Other offences against the Act (not including offences relating to Outwork)	—	—	10	—	—
TOTAL	30	26	10	14	—

PART VIII OF THE ACT

OUTWORK

(Sections 133 and 134)

Nature of Work	SECTION 133			SECTION 134		
	No. of out-workers in August list required by Sec. 113(1) (c)	No. of cases of default in sending lists to the Council	No. of prosecutions for failure to supply lists	No. of instances of work in unwholesome premises	Notices Served	Prosecutions
Wearing apparel— making, etc.	—	—	—	—	—	—
Paper bags	—	—	—	—	—	—
TOTAL	—	—	—	—	—	—

SANITARY INSPECTION OF THE AREA.—The total number of visits made by the Public Health Inspectors was 44,189. The nature of these inspections is shown in Table S.I.3, and Table S.I.4 contains a list of notices served and the results of such notices.

TABLE S.I.3.

Number and nature of inspections during 1965.

(a) Number of complaints investigated:—

1. Housing defects	1,051
2. Choked and defective drains	238
3. Emissions of smoke	21
4. Accumulations of offensive matter	12
5. Miscellaneous	70

(b) Inspections re Sanitation and Food Supply:—

Carried forward 4,613

TABLE S.I.3.—*continued*

Number and nature of inspections during 1965.

(b) Inspections re Sanitation and Food Supply— <i>continued.</i>	Brought forward	4,613
Factories Act, 1937:		
Factories without mechanical power	....	13
Factories with mechanical power	....	341
Workplaces	....	9
Outworkers	....	—
Brokers' Premises	....	3
Fried Fish Shops	....	222
Fishmongers' and Greengrocers'	....	524
Butchers' Shops	....	856
Groceries, Sweets and General Shops	....	1,832
Confectioners and Cafes	....	190
Bakehouses	....	141
Canteens	....	382
Public Houses, Beer Houses, etc.	....	546
Food Preparing and Storing Places	....	467
Food Hawkers' Storage Accommodation and Market Stalls	....	152
Merchandise Marks Acts & Orders	....	63
Dairies and Milkshops	....	171
Ice Cream Premises	....	324
Samples of milk procured for bacteriological and biological examination	....	222
Samples of Ice Cream	....	64
Samples of Ice Lollies	....	12
Samples of drinking water for bacteriological examination	....	45
Samples of swimming bath water for bacteriological examination	....	9
Samples of cream	....	6
Samples of other foodstuffs and swabs for bacteriological examination	....	1
Samples of milk and other foodstuffs for chemical analysis	....	281
Samples of Fertilisers and Feeding Stuffs	....	7
Pet Animals Act, 1951	....	21
Pharmacy and Poisons Act, 1933	....	123
Prevention of Damage by Pests Act, 1949	....	2,134
Inspection of dwellinghouses and other premises for vermin infestation	....	4,024
Food Poisoning Enquiries	....	55
Visits to work in progress	....	12,044
Visits re Housing—measurement for "Permitted Numbers"	....	215
Hairdressers' and Barbers' Premises	....	551
Atmospheric Pollution Gauges	....	1,227
Rent Act, 1957—Inspections re Certificates of Disrepair	....	13
Inspections re Improvement Grants	....	89
Smell Nuisance	....	12
Dust Nuisance	....	125
Improvement Grant Enquiries	....	879
Riding School	....	11
Typhoid Enquiries	....	1
Offices, Shops and Railway Premises Act, 1963	....	4,359
Miscellaneous Visits (interviews, etc.)	....	3,910
Noise Control	....	65
Housing Survey	....	93
Waste Foods Order	....	77
Animal Boarding Establishment Act	....	7
Smoke Control Visits	....	2,657
Scrap Metal Dealers	....	1
		44,189

Table S.I.4.

Number of defects for which notices were served during 1965, and notices complied with during the year (including outstanding notices from previous year)

Subject of Notices	Preliminary Notices	Statutory Notices	Number complied with
Dampness arising from defective roofs, eaves-gutters, rainwater pipes and pointing	1736	1103	737
Defective and choked drains, closets, cesspools, etc.	233	77	202
Absence of proper sink	28	18	9
Unsatisfactory yard paving	23	6	5
Filthy or verminous condition of premises	—	1	1
Accumulation of manure and offensive matter	5	1	—
Other housing defects	1970	1240	1081
Excessive emissions of smoke	4	—	1
Miscellaneous	10	—	9
Contravention of:			
Factories Act, 1937	17	—	12
Food Hygiene Regulations, 1960	290	—	242
Unauthorised use of land for camping purposes	—	—	—
	4316	2446	2299

Referred to other departments:—

To Borough Engineer.

To Housing Manager

To Water Engineer

To N.W. Gas Board

Escape of coal gas 4

CHOKED DRAINS.—During the year 819 complaints of choked drains were made to the Department. Of this number 474 drains were freed from obstruction by members of the staff of the Public Health Inspector's Department thus obviating the necessity for serving notices upon the owners.

PREMISES AND OCCUPATIONS WHICH CAN BE CONTROLLED BY BYELAWS OR REGULATIONS

Offensive Trades.—There are no offensive trades carried on in the Borough.

Houses in Multi-Occupation.—There are 17 premises known to the Department to be used as Houses-let-in-lodgings.

Common Lodging Houses.—There is now only one common lodging house in the Borough.

This is owned by the Council and administered on their behalf by the Salvation Army. This accommodation was purchased and improved by the Authority to set a high standard for such accommodation.

During the year 44 visits of inspection were made to the common lodging house.

Hairdressers and Barbers.—There were at the end of the year 212 persons registered as hairdressers or barbers, and the number of premises registered was 216.

551 visits of inspection were made to these premises during the year.

Byelaws with respect to Nuisances.—These byelaws prove very effective for the control of pig-keeping. There were 11 persons in the Borough known to be engaged in the keeping of pigs, at the end of the year. 77 visits of inspection were made to pig styes during the year.

St. Helens Corporation (Electricity and General Powers) Act, 1948. Noise Abatement Act, 1960.

65 observations and interviews were made during investigation of complaints of nuisances from noise during 1965.

Noise complaints during the year resulted from:

- (a) Noise from powerful compressors and fans in a factory which works both night and day.
- (b) Noise from steam exhaust valves in a factory adjacent to residential property.
- (c) Noise from a "Pop Group" practising in the living-room of a house.
- (d) Alleged noise from milk roundsman repositioning crates on a vehicle in the early morning adjacent to residential property.
- (e) Alleged noise from bulldozer and lorries on a tip adjacent to residential property.

- (f) Impact noises from large engineering factory adjacent to residential property.
- (g) Impact noises due to delivery of metal equipment to factory early in the day.
- (h) Alleged noise from loudspeakers on forecourt of a large garage.

As in previous years, some of the complaints could not be justified, but in most of the cases investigated, the persons concerned were able to reduce the noise levels by relatively simple adjustments or alterations to reasonable proportions.

OTHER SANITARY CONDITIONS

Prevention of Damage by Pests Act, 1949.—Table S.I.5 gives particulars of the work carried out under the above-mentioned Act during the year.

Table S.I.5.

PREVENTION OF DAMAGE BY PESTS ACT, 1949

Report for year ended 31st December, 1965

	Type of Property				
	Local Authority	Dwelling houses	Agricultural	All other (including business premises)	Total
1. Total number of properties in Local Authority's district	100	31677	140	2801	34718
2. Number of properties inspected as a result of:					
(a) notification.....	63	286	—	92	441
(b) survey under the Act	25	135	4	30	194
(c) otherwise (e.g. when visited primarily for some other purpose).....	40	1417	17	664	2138
3. Total inspections carried out	618	2920	27	1467	5032
4. No. of properties inspected which were found to be infested by:					
(a) Rats	50	389	3	65	507
(b) Mice	37	40	—	52	129
5. No. of infested properties treated by Local Authority	68	109	2	99	278
6. Total treatments carried out	80	124	2	99	305

OFFICES, SHOPS AND RAILWAY PREMISES ACT, 1963.

The operation of the above-mentioned Act took up a large proportion of the time of the Public Health Inspectorate in 1965. 3,158 visits of all kinds were paid by Inspectors to registered premises and in addition 1,201 visits were made to check on the need for registration.

The Narrative Report for 1965 of the Chief Public Health Inspector was as follows:—

Registration and Inspection

At the end of 1964 it was obvious from local knowledge that a large number of offices and shops still required to be registered under the Act. This showed a lack of impact of the organised propaganda.

The centre of the town was scheduled to be inspected as a proposed smoke control area, so the two responsibilities were worked together to expedite both the registration and inspection of the offices and shops in the area. The food shops were inspected at the same time for food hygiene purposes, O.S.R. provisions and smoke control by the Food Hygiene Inspectors. The concentration of Inspectors enabled a complete initial inspection to be made of all offices and shops in the central business area of the town. At the same time the District Inspectors carried out a street by street survey of the Borough drawing the attention of the occupiers of offices and shops, where necessary, to the provisions of the Act and the need for registration.

Unfortunately this survey of the Borough had to be followed at a later date by letters being sent to 166 occupiers who had still not registered even after their attention had been drawn to their individual responsibilities.

Enforcement of the Act

General

Since the Gowers Report in 1949 all plans submitted under Building Byelaws have been specially scrutinised with regard to the possible effect of future legislation on shops and offices, and the attention of architects, builders and shop fitters submitting such plans has been drawn to the need to make provision for possible future requirements.

Unfortunately there has been a noticeable lack of appreciation by architects and shop fitters generally of the need to provide for future requirements of such essential facilities as ventilation, washing facilities, sanitary accommodation, eating accommodation and means of providing an adequate temperature. The chief concern in the past has been to provide a "nice elevation" with unbroken lines leaving the down to earth practical facilities as a poor relation. The attention of architects is still having to be drawn to the provisions of the Offices, Shops and Railway Premises Act even though the Act was brought out in 1963.

Cleanliness

This aspect of enforcement has had to receive the most attention in inspections particularly in regard to the smaller professional offices and also the back rooms of shop premises. The front shop seen by the customer is generally kept up to standard, but the rest of the shop falls well below this picture. Passages and corridors particularly have been found to be grossly neglected in regard to cleanliness. High ceilings and walls if cleaned at all have only been cleansed as high as a person can reach without ladders.

Overcrowding

Generally little or no overcrowding of premises has been found except in regard to kiosks in some shops. Whilst these are exempt under the Act in regard to space, the attention of occupiers has been drawn to the health aspects of the situation. It is felt that this type of office should not be exempt from space requirements.

On the question of overcrowding in offices, it is suggested that the legislation should require a suitable notice to be displayed in each room giving the "Permitted Maximum Number" of persons allowed by the Act to be employed therein. This would assist both the occupier and employee in the allocation of space and would also cut down routine inspection time after the initial survey.

Temperature

Small shops seem to be the main offenders in respect of temperature levels, more emphasis usually being placed on sales approach and attraction rather than comfortable working conditions for the shop assistants. Far too often front doors are kept open, on instructions, without regard to the general effect on the temperature in the shop. Absence of suitable thermometers was also one of the largest omissions.

Ventilation

Four per cent of all defects found to exist in shops and offices were concerned with inadequate means of ventilation, modernised shops being the main offenders.

Lighting

Difficulty has been experienced in regard to lighting, due to the lack of official standards, but using the I.E.S. code as a guide, quite a number of premises were found to be poorly lit. One of the worst cases was a modern office block with lighting designed by a consultant which gave readings of below 10 lumens per sq. ft. on many desks. Once again, as in cleanliness, the rear rooms of shop premises have needed the most attention, being poorly illuminated in comparison with the displays of goods in the shop.

Sanitary Conveniences

Due to past representations few premises require additional sanitary accommodation, present action being mainly concerned with defects, cleanliness and the provision of suitable ante-spaces. The use of ante-spaces for storage purposes was commonly found.

Washing Facilities

These facilities were found to be inadequate in a large number of premises, either by their absence or insufficiency. The provision of hot water to existing wash basins was another aspect which required much attention, and in some cases occupiers were markedly reluctant to provide this facility during the full working hours.

Drinking Water, Clothing Accommodation, Seating, Facilities for Eating

The provision of these facilities presented little or no problems.

Floors, Passages and Stairs

Next to cleanliness of the premises, this aspect of the welfare provisions required the most attention, being concerned with unsuitable handrails, defective stair treads and floors and the protection of openings in floors. Despite the many omissions found, no accidents have been notified which could be directly attributed to any shortcomings in this direction. Obstruction of staircases was often found in the smaller shops, due to their use as shelves for storage purposes.

Dangerous Machinery

Initially quite a large amount of time had to be spent on the fencing of machinery and education of the occupiers on the need for ensuring adequate training of the employees using the machines. Generally common sense had been displayed by the occupiers, in placing a more experienced member of the staff on the machines. In the latter half of the year it was found that a large proportion of food slicing machines had been brought up to a satisfactory standard of safety. This tends to show that the early talks between the Ministry and machine manufacturers on adequate fencing were having effect.

Prohibition of Heavy Work

Whilst no action could be taken in regard to this requirement, it was noted that loads which might not be classed as too heavy for one individual could be held to be so for a younger or less experienced member of the staff.

It would assist in this matter if some standard of maximum weights and bulk could be formulated as soon as possible.

First Aid

Despite the fact that emphasis has been placed on the provision of first-aid materials for assistants in food shops for a number of years, it was found that the need for such materials in other shops and offices was little appreciated and the attention of numerous occupiers had to be drawn to the requirements.

Accidents

Ten accidents of a minor nature were notified during the year.

It was obvious that occupiers had not made themselves aware of their responsibilities in the matter of notification of accidents. This may have been due to the lack of impact of the publicity on the Act.

Whilst no action could be taken concerning the death of a boy in registered premises, the attention of the Liaison Officer was drawn to the circumstances of the case, as the use of these boys in such work is widespread throughout the area. It is felt that either the boys should not be used, or should be brought within the occupiers' responsibility.

Three other matters were drawn to the attention of the Liaison Officer due to their wider aspects. These were concerned with safety precautions in regard to barrel hoists installed by a very large brewery company, wall paper trimming machines and power operated paint mixing machines in shops.

Registration of these premises was the first requirement, and the following table sets out the details:

Table S.I.4a

Class of Premises	No. of premises registered during year	Total number of registered premises at end of year	No. of registered premises receiving a general inspection during year
Offices	68	226	164
Retail shops	241	602	488
Wholesale shops, warehouses	7	32	8
Catering establishments open to the public, canteens	15	133	169
Fuel storage depots	—	—	—
TOTALS	331	993	829

Places of Public Entertainment.—71 visits were paid to places of public entertainment during 1965. The condition of these premises throughout the year was found to be generally satisfactory.

Mortuaries.—A Public Mortuary with post-mortem room is maintained behind the Town Hall, and is under the supervision of the Medical Officer of Health. During the year, 230 bodies were received into the mortuary and 205 post-mortem examinations were conducted.

Arrangements for the Disposal of the Dead.—At the end of the year there were 17.717 acres of land available for burials at the Borough Cemetery. Of the land adjoining the cemetery available for extension purposes, consisting of 23.8 acres, 8.47 acres has been used for the Crematorium and a Garden of Remembrance, leaving 15.33 acres for future earth burials. During the year there were 503 cremations, making a total of 1,397 since the Crematorium was opened.

Rag Flock and Other Filling Materials Act, 1951.—Owing to the continued shortage of Public Health Inspectors, no samples of rag flock or other filling materials were taken during the year.

Housing Act, 1957—Slum Clearance.—Slum Clearance work continued under the current five year programme during the year.

During the year nine Clearance Areas were represented to the Public Health Committee—Worsley Brow No. 2 Clearance Area, comprising 5 houses; City Road Clearance Area, comprising 11 houses; Burtonhead Road Clearance Area, comprising 22 houses, Finger Post Nos. 1 to 5 Clearance Areas, comprising 249 houses; and Hall Street Clearance Area, comprising 7 houses.

Consequent thereon the Council made the St. Helens (Worsley Brow No. 2), the St. Helens (Burtonhead Road), and the St. Helens (Hall Street) Clearance Orders, 1965, and the St. Helens (City Road) Compulsory Purchase Order, 1965.

The St. Helens (Worsley Brow No. 2) Clearance Order, 1965, was confirmed by the Ministry of Housing and Local Government in July, 1965, and the St. Helens (City Road) Compulsory Purchase Order, 1965, was confirmed in November, 1965.

Under these orders 16 properties will be demolished and 16 new dwellings will be required to rehouse the persons displaced.

No Closing Orders were made during the year.

Undertakings to demolish by the owners were accepted in respect of 63 houses and certificates of unfitness were given in respect of 5 houses owned by the Authority.

Inspections were continued on the extensive Park Road Nos. 1 & 2 and Pocket Nook Schemes, the last areas of which are expected to be represented in 1966.

Demolition and re-housing continued during the year as follows:

	<i>Houses demolished</i>	<i>Persons Re-housed</i>	<i>Families Re-housed</i>
(1) Clearance Areas	208	422	143
(2) Undertakings to demolish by owners	17	73	19
(3) Certificates of unfitness by M.O.H.	17	83	31
(4) Prefabricated bungalows	7	2	1
	<hr/> 249 <hr/>	<hr/> 580 <hr/>	<hr/> 194 <hr/>

XIX.—HOUSING.

Housing

(1) Number of dwellinghouses erected during 1965 in the various wards of the Borough.

	<i>N.E.</i>	<i>S.E.</i>	<i>C.</i>	<i>N.W.</i>	<i>S.W.</i>	<i>H.</i>	<i>E.S.</i>	<i>W.S.</i>	<i>P.</i>	<i>M.B.</i>	<i>Total</i>
Local Authority	—	—	17	—	—	—	6	214	20	—	257
Private Enterprise	1	2	—	17	—	3	32	17	—	8	80

(2) Total number of houses completed during the year within the Borough:—

(a) with State assistance under Housing Acts											
(i) Local Authority in Borough	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	257
(ii) Private Enterprise	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	—
(b) without State assistance											
(i) Local Authority	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	—
(ii) Private Enterprise	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	80

Housing Acts, 1949 and 1964—Improvement Grants and Areas.

Inspections for Discretionary Improvement Grants and Standard Grants continued to be carried out by the Public Health Inspectors. 52 applications for Discretionary Grants and 16 for Standard Grants were dealt with in the year. 2 applications for loans were also dealt with.

A large number of informal enquiries were also answered by the staff.

Subsequent to the passing of the Housing Act, 1964, a survey of the Borough was made in order to ascertain which areas could be possibly designated as Improvement Areas under the Act. The survey revealed that there were approximately 8,000 houses suitable for improvement in either large or small areas.

To obtain some background to the effectiveness of the legal procedure laid down for Improvement Areas, a street was selected consisting of suitable properties, many of which had already been improved with grant aid. All the houses were inspected and their complete histories collated. All owners and tenants were interviewed as to their reaction to improvement of the houses. On the basis of the findings it was obvious that the declaration of the street as an Improvement Area would be an entire waste of time, due to the reluctance of the bulk of the owner occupiers and tenants to agree to improvement. The provisions of the Act on this basis were useless as a means of area improvement. Despite this point, however, discussions and interviews were held over a period of time with the owners and tenants to try and persuade them to improve their houses or to agree to the same.

Following the above exercise, another area was selected for treatment, but this time it was known that a single landlord was involved in the majority of tenanted properties. In this case concentration was placed on getting the tenants to agree to improvement and also to inspect the houses fully for repairs. The latter procedure was to ensure that the houses would be in good repair when improvement was undertaken and also to prevent any further deterioration in the structure during any waiting period envisaged by the Act. The owner was served with informal notices in respect of these repairs and the inspections were carried out in blocks. The landlord proceeded to carry out the repairs block by block and by the end of the year one block of houses had been completely repaired. It is intended that the matter should now be taken a step further to possible improvement. The approach of repairing the houses first would appear to have had some effect on the tenants because in the first block they all agreed to have their houses improved.

As the proposed No. 4 Smoke Control Area included approximately 900 houses with a further life of at least 30 years, if maintained, a survey of the facilities in each house was carried out at the same time as the inspection for smoke control purposes. Coupled with the above inspections, each house was also surveyed for repairs and informal notices were served, where necessary, on the owners concerned. In every case where a house fell short of the improvement grant standard Government literature was given to the owners and tenants. The Inspector also discussed the question with the tenant or owner/occupier during his visit.

If a house was not up to standard the owners were also advised to consider the two questions of possible improvements and smoke control as one operation in order to save money and unnecessary and inconvenient work.

On the preliminary survey, 44 tenants and 27 owner/occupiers agreed to have their houses improved.

To augment the public relations aspect of the Public Health Inspector's work the travelling exhibition van on Improvement Grants of the Ministry of Housing and Local Government was engaged for a week in August to circulate within the area whilst the survey was in progress.

Rent Act, 1957

The following are particulars of applications received under this Act during the year:—

(1) Number of applications for Certificates of Disrepair.....	18
(2) Number of decisions not to issue Certificates	—
(3) Number of decisions to issue Certificates	
(a) in respect of some but not all defects	4
(b) in respect of all defects	2
(4) Number of Undertakings given by landlords	12
(5) Number of Certificates of Disrepair issued	6
(6) Applications by landlords for cancellation of Certifi- cates	2

(7) Objection by tenants to cancellation of Certificates	4
(8) Certificates cancelled by Local Authority	2
(9) Decisions by Local Authority to cancel certificates in spite of objection	2

DISINFESTATION OF PREMISES AND HOUSEHOLD EFFECTS

A total of 4024 inspections of dwellinghouses and food premises for vermin infestation were made during the year, and the following disinfestation work was carried out:—

(1) Privately owned dwellinghouses	147
(2) Occupied Council houses	135
(3) Food premises	23
(4) Corporation buildings, other than dwellinghouses	15
(5) Other buildings.....	15
Total No. of premises treated	335

The insecticides used were either D.D.T., Gammexane or Chlordane.
